

TITLE 4. PROFESSIONS AND OCCUPATIONS

CHAPTER 11. STATE BOARD OF DENTAL EXAMINERS

(Authority: A.R.S. § 32-1203 et seq.)

All former rules renumbered, new Article 11 added (Supp. 81-4).

ARTICLE 1. DEFINITIONS

Article 1, consisting of Section R4-11-101, adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 1, consisting of Sections R4-11-101 through R4-11-103, renumbered to Article 2, Sections R4-11-201 through R4-11-203; Sections R4-11-104 and R4-11-105 repealed, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

R4-11-101.	Definitions
R4-11-102.	Renumbered
R4-11-103.	Renumbered
R4-11-104.	Repealed
R4-11-105.	Repealed

ARTICLE 2. LICENSURE BY CREDENTIAL

New Article 2, consisting of Sections R4-11-201 through R4-11-205, made by final rulemaking at 9 A.A.R. 4126, effective November 8, 2003 (Supp. 03-3).

Article 2, consisting of Sections R4-11-201 through R4-11-203, expired under A.R.S. § 41-1056(E), effective April 30, 2001 (Supp. 01-2).

Article 2, consisting of Sections R4-11-201 through R4-11-203, renumbered from Article 1, Sections R4-11-101 through R4-11-103 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 2, consisting of Sections R4-11-201 and R4-11-203, renumbered to Article 3, Sections R4-11-301 and R4-11-302; Sections R4-11-202 and R4-11-204 through R4-11-216 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

R4-11-201.	Clinical Examination; Requirements
R4-11-202.	Dental Licensure by Credential; Application
R4-11-203.	Dental Hygienist Licensure by Credential; Application
R4-11-204.	Dental Assistant Radiography Certification by Credential
R4-11-205.	Application for Dental Assistant Radiography Certification by Credential
R4-11-206.	Repealed
R4-11-207.	Repealed
R4-11-208.	Repealed
R4-11-209.	Repealed
R4-11-210.	Repealed
R4-11-211.	Repealed
R4-11-212.	Repealed
R4-11-213.	Repealed
R4-11-214.	Repealed
R4-11-215.	Repealed
R4-11-216.	Repealed

ARTICLE 3. EXAMINATIONS, LICENSING QUALIFICATIONS, APPLICATION AND RENEWAL, TIME-FRAMES

Article 3, consisting of Sections R4-11-301 and R4-11-302, renumbered from Article 2, Sections R4-11-201 and R4-11-203 and amended; new Sections R4-11-303 through R4-11-305 adopted, by

final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 3, consisting of Sections R4-11-301 through R4-11-304, repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

R4-11-301.	Application
R4-11-302.	Determination of Successful Completion of Licensure Examination
R4-11-303.	Application Processing Procedures: Issuance, Denial, and Renewal of Dental Licenses, Restricted Permits, Dental Hygiene Licenses, Denturist Certificates, and Dispensing Registrations
R4-11-304.	Application Processing Procedures: Issuance and Denial of Dental Assistant Certificates
R4-11-305.	Application Processing Procedures: Issuance, Denial, and Renewal of General Anesthesia and Semi-Conscious Sedation Permits, and Conscious Sedation Permits

ARTICLE 4. FEES

Article 4, consisting of Sections R4-11-401 through R4-11-407, renumbered from Article 9, Sections R4-11-901 through R4-11-906 and R4-11-909, amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 4, consisting of Sections R4-11-401 through R4-11-403 and R4-11-408, renumbered to Article 6, Sections R4-11-601 through R4-11-603, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

R4-11-401.	Licensure Fees
R4-11-402.	Denturist Certification Fees
R4-11-403.	Examination Fees
R4-11-404.	Penalty Fees for Late Renewal
R4-11-405.	Other Fees
R4-11-406.	Fees for Anesthesia and Sedation Permits

ARTICLE 5. DENTISTS

Article 5, consisting of Section R4-11-501, renumbered from Article 11, Section R4-11-1102, amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 5, consisting of Section R4-11-502 and R4-11-504, renumbered to Article 7, Sections R4-11-701 and R4-11-702; Sections R4-11-501 and R4-11-503 repealed, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

R4-11-501.	Dentist of Record
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ARTICLE 6. DENTAL HYGIENISTS

Article 6, consisting of Sections R4-11-601 through R4-11-603, renumbered from Article 4, Sections R4-11-402, R4-11-403, and R4-11-408 and amended; Sections R4-11-604 through R4-11-608 adopted, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 6, consisting of Sections R4-11-602 and R4-11-603, renumbered to Article 10, Sections R4-11-1001 and R4-11-1002, and Section R4-11-601 repealed, by final rulemaking at 5 A.A.R.

580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-601. Duties and Qualifications
- R4-11-602. Care of Homebound Patients
- R4-11-603. Limitation on Number Supervised
- R4-11-604. Selection Committee and Process
- R4-11-605. Dental Hygiene Committee
- R4-11-606. Candidate Qualifications and Submissions
- R4-11-607. Duties of the Dental Hygiene Committee
- R4-11-608. Dental Hygiene Consultants

ARTICLE 7. DENTAL ASSISTANTS

Article 7, consisting of Sections R4-11-701 and R4-11-702, renumbered from Article 5, Sections R4-11-502 and R4-11-504, and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 7, consisting of Section R4-11-701, renumbered to Article 5, Section R4-11-502, and Sections R4-11-702 through R4-11-710 repealed, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-701. Procedures and Functions Performed by a Dental Assistant under Supervision
- R4-11-702. Limitations on Procedures or Functions Performed by a Dental Assistant under Supervision
- R4-11-703. Repealed
- R4-11-704. Repealed
- R4-11-705. Repealed
- R4-11-706. Repealed
- R4-11-707. Repealed
- R4-11-708. Repealed
- R4-11-709. Repealed
- R4-11-710. Repealed

ARTICLE 8. DENTURISTS

Article 8, consisting of Sections R4-11-801 and R4-11-802, renumbered from Article 12, Sections R4-11-1201 and R4-11-1202, and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 8, consisting of Sections R4-11-802 through R4-11-806, renumbered to Article 13, Sections R4-11-1301 through R4-11-1305, and Section R4-11-801 repealed, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-801. Consultants to the Board
- R4-11-802. Recognition of Schools of Denture Technology

ARTICLE 9. RESTRICTED PERMITS

Article 9, consisting of Sections R4-11-901 through R4-11-905, renumbered from Article 10, Sections R4-11-1001 through R4-11-1005 and amended; Section R4-11-906 adopted, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 9, consisting of Sections R4-11-901 through R4-11-906 and R4-11-909, renumbered to Article 4, Sections R4-11-401 through R4-11-407, and Sections R4-11-907 and R4-11-908 repealed, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-901. Application for Restricted Permit
- R4-11-902. Issuance of a Restricted Permit
- R4-11-903. Recognition of a Charitable Dental Clinic Organization

- R4-11-904. Determination of Minimum Rate
- R4-11-905. Restricted Permit Denial
- R4-11-906. Fully Retired or Permanently Disabled Licensees or Certificate Holders Providing Charitable Services

ARTICLE 10. DENTAL TECHNICIANS

Article 10, consisting of Sections R4-11-1001 and R4-11-1002, renumbered from Article 6, Section R4-11-602 and R4-11-603, amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 10, consisting of Sections R4-11-1001 through R4-11-1005, renumbered to Article 9, Sections R4-11-901 through R4-11-905, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-1001. Duties of Dental Laboratory Technician
- R4-11-1002. Dental Technician Laboratory Work Orders
- R4-11-1003. Renumbered
- R4-11-1004. Renumbered
- R4-11-1005. Renumbered
- R4-11-1006. Repealed

ARTICLE 11. ADVERTISING

Article 11, consisting of Section R4-11-1101, adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 11, consisting of Section R4-11-1102, renumbered to Article 5, Section R4-11-501, and Section R4-11-1104 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-1101. Advertising

ARTICLE 12. CONTINUING DENTAL EDUCATION

Article 12, consisting of Sections R4-11-1201 through R4-11-1207, renumbered from Article 14, Sections R4-11-1402 through R4-11-1408 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 12, consisting of Sections R4-11-1201 and R4-11-1202, renumbered to Article 8, Sections R4-11-801 and R4-11-802, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-1201. Continuing Dental Education
- R4-11-1202. Compliance
- R4-11-1203. Dentists
- R4-11-1204. Dental Hygienists
- R4-11-1205. Denturists
- R4-11-1206. Restricted Permit Holders
- R4-11-1207. Types of Courses

ARTICLE 13. GENERAL ANESTHESIA AND SEDATION

Article 13, consisting of Sections R4-11-1301 through R4-11-1305, adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-1301. General Anesthesia and Semi-conscious Sedation
- R4-11-1302. Conscious Sedation
- R4-11-1303. Oral Conscious Sedation
- R4-11-1304. Reports of Adverse Occurrences
- R4-11-1305. Education
- R4-11-1306. Renewal of Permit

ARTICLE 14. DISPENSING DRUGS AND DEVICES FOR PROFIT AND NOT FOR PROFIT

Article 14, consisting of Sections R4-11-1401 through R4-11-1406, adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 14, consisting of Sections R4-11-1402 through R4-11-1408, renumbered to Article 12, Sections R4-11-1201 through R4-11-1207 and Sections R4-11-1401 and R4-11-1409 repealed, by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Article 14, consisting of R4-11-1401 through R4-11-1409, adopted effective July 21, 1995 (Supp. 95-3).

Section

- R4-11-1401. Registration and Renewal
- R4-11-1402. Prescribing
- R4-11-1403. Labeling and Dispensing
- R4-11-1404. Storage and Packaging
- R4-11-1405. Recordkeeping
- R4-11-1406. Compliance

ARTICLE 15. COMPLAINTS, INVESTIGATIONS, DISCIPLINARY ACTION, REINSTATEMENT OF REVOKED LICENSES

Article 15, consisting of Sections R4-11-1501 through R4-11-1504, adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-1501. Ex-parte Communication
- R4-11-1502. Complaint Investigator Qualifications
- R4-11-1503. Initial Complaint Review
- R4-11-1504. Expired

ARTICLE 16. MEDIATION

Article 16, consisting of Section R4-11-1601 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-1601. Mediation Process

ARTICLE 17. REHEARING OR REVIEW

Article 17, consisting of Section R4-11-1701, renumbered from Article 7, Section R4-11-701, and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

Section

- R4-11-1701. Procedure

ARTICLE 1. DEFINITIONS

R4-11-101. Definitions

The following definitions, and definitions in A.R.S. § 32-1201, apply to this Chapter:

“Analgesia” means a state of decreased sensibility to pain produced by using nitrous oxide (N₂O) and oxygen (O₂) with or without local anesthesia.

“Anxiolysis” means the reduction or elimination of anxiety.

“Application” means, for purposes of Article 3 only, forms designated as applications and all documents and additional information the Board requires to be submitted with an application.

“Calculus” means a hard mineralized deposit attached to the teeth.

“Certificate holder” means a denturist who practices denture technology under A.R.S. Title 32, Chapter 11, Article 5.

“Clinical evaluation” means a dental examination of the patient named in a complaint regarding the dental condition as it exists at the time the examination is performed.

“Closed subgingival curettage” means the removal of the inner surface of the soft tissue wall of a periodontal pocket in a situation where a flap of tissue has not been intentionally or surgically opened.

“Combination inhalation and enteral conscious sedation” is conscious sedation induced by the administration of nitrous oxide and oxygen in combination with one or more enteral drugs or non-drug substances.

“Conscious sedation” is a minimally depressed level of consciousness that allows the patient to retain the ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command and is induced by a drug or non-drug method or a combination of both methods.

“Controlled substance” has the meaning prescribed in A.R.S. § 36-2501(A)(3).

“Credit hour” means one clock hour of participation in a recognized continuing dental education program.

“Deep sedation” has the same meaning as “semi-conscious sedation”.

“Dental laboratory technician” or “dental technician” has the meaning prescribed in A.R.S. § 32-1201(6).

“Designee” means a person to whom the Board delegates authority to act on the Board’s behalf regarding a particular task specified by this Chapter.

“Direct supervision” means, for purposes of Article 7 only, that a licensed dentist is present in the office and available to provide immediate treatment or care to a patient and observe a dental assistant’s work.

“Direct supervision” means, for purposes of Article 13 only, that a licensed dentist is physically present in the operatory and actually performing dental procedures.

“Dispense for profit” means selling a drug or device for any amount above the administrative overhead costs to inventory.

“Documentation of attendance” means a document that contains the following information:

Name of sponsoring entity;

Course title and synopsis;

Number of credit hours;

Name of speaker;

Date, time, and location of the course; and

Signature of person authorized to verify registration.

“Enteral” means an administration technique in which a drug or non-drug substance is absorbed through the oral, rectal, sublingual, or nasal mucosa.

“Epithelial attachment” means the layer of cells that extends apically from the depth of the gingival (gum) sulcus (crevice) along the tooth, forming an organic attachment.

“Ex-parte communication” means a written or oral communication between a decision maker, fact finder, or Board member and one party to the proceeding, in the absence of other parties.

“Fully retired” means a dentist, dental hygienist, or denturist is at least 65 years old and has totally withdrawn from the active practice of dentistry, dental hygiene, or denturism.

“General anesthesia” is a state of unconsciousness accompanied by partial or complete loss of protective reflexes, including the inability to continually maintain an airway and to respond appropriately to physical stimulation or verbal command, that is induced by a drug or non-drug method or a combination of both methods.

“General supervision” means, for purposes of Article 7 only, a licensed dentist is available for consultation, whether or not the dentist is in the office, regarding procedures or treatment that the dentist authorizes and for which the dentist remains responsible.

“Homebound patient” means a person who is unable to receive dental care in a dental office as a result of a medically diagnosed disabling physical or mental condition.

“Informal interview” means a proceeding conducted under A.R.S. § 32-1263.02, during which a Board member, acting as an informal interviewing officer, and other investigators, hear testimony from a complainant, licensee or certificate holder, and any witnesses, and receive and review evidence relating to a complaint to form findings of fact, conclusions of law, and a recommended disposition for presentation to the full Board.

“Intravenous or intramuscular sedation” is the parenteral use of a drug or non-drug substance to induce general anesthesia, semi-conscious sedation, or conscious sedation.

“Investigative interview” means a proceeding conducted under A.R.S. § 32-1263.02, during which an investigator or investigative panel hears testimony from a complainant, licensee or certificate holder, and any witnesses, and receives and reviews evidence relating to a complaint to form findings of fact, conclusions of law, and a recommended disposition for presentation to the full Board.

“Irreversible procedure” means a single treatment, or a step in a series of treatments, that causes change in the affected hard or soft tissues and is permanent or requires reconstructive or corrective procedures.

“Jurisdiction” means the Board’s power to investigate and rule on complaints that allege grounds for disciplinary action under A.R.S. Title 32, Chapter 11 or this Chapter.

“Lay person” means a person who is not a dentist, dental hygienist, dental assistant, denturist, or dental technician.

“Licensee” means a dentist, dental hygienist, or person who holds a restricted permit under A.R.S. § 32-1237.

“Local anesthesia” is the elimination of sensations, such as pain, in one part of the body by the injection of an anesthetic drug.

“Nitrous oxide analgesia” means nitrous oxide (N₂O/O₂) used as an inhalation analgesic.

“Nonsurgical periodontal treatment” means plaque removal, plaque control, supragingival and subgingival scaling, root planing, and the adjunctive use of chemical agents.

“Nurse anesthetist” means a licensed nurse with special training in all phases of anesthesia.

“Outpatient” means an individual who receives treatment in a dental office or clinic.

“Oral conscious sedation” is conscious sedation induced by an enterally administered drug or non-drug substance or combination inhalation and enterally administered drug or non-drug substance on an outpatient basis.

“Periodontal examination and assessment” means to collect and correlate clinical signs and patient symptoms that point to either the presence of or the potential for periodontal disease.

“Periodontal pocket” means a pathologic fissure bordered on one side by the tooth and on the opposite side by crevicular epithelium and limited in its depth by the epithelial attachment.

“Permanently disabled” means a dentist, dental hygienist, or denturist has totally withdrawn from the active practice of dentistry, dental hygiene, or denturism due to a physician’s order because of a medical reason.

“Plaque” means a film-like sticky substance composed of mucoidal secretions containing bacteria and toxic products, dead tissue cells, and debris.

“Prescription-only device” means:

Any device that is restricted by the federal act, as defined in A.R.S. § 32-1901, to use only under the supervision of a medical practitioner; or

Any device required by the federal act, as defined in A.R.S. § 32-1901, to bear on its label the legend “Rx Only.”

“Prescription-only drug” means:

A drug that, because of its toxicity or other potential for harmful effect, the method of its use, or the collateral measures necessary to its use, is not generally recognized by experts who are qualified by scientific training and experience to evaluate the drug’s safety and efficacy, as safe for use, except by or under the supervision of a medical practitioner;

A drug that is limited by an approved new drug application under the federal act or A.R.S. § 32-1962 to use under the supervision of a medical practitioner;

A potentially harmful drug, the labeling of which does not contain full and adequate directions for use by the consumer; or

A drug, other than a controlled substance, required by the federal act to contain on its label the legend “Rx Only.”

“President’s designee” means the Board’s executive director, an investigator, or a Board member acting on behalf of the Board president.

“Preventative and therapeutic agents” means substances used in relation to dental hygiene procedures that affect the hard or soft oral tissues to aid in preventing or treating oral disease.

“Prophylaxis” means a scaling and polishing procedure performed on patients with healthy tissues to remove coronal plaque, calculus, and stains.

“Recognized continuing dental education” means a program whose content directly relates to the art and science of oral health and treatment, provided by a recognized dental school as defined in A.R.S. § 32-1201(15), recognized dental hygiene school as defined in A.R.S. § 32-1201(14), or recognized school of denture technology as defined in A.R.S. § 32-1201(16), or sponsored by a national or state dental, dental hygiene, or denturist association, dental, dental hygiene, or denturist study club, governmental agency, or commercial dental supplier.

“Representative” means, for purposes of Article 15 only, a person recognized by the Board as authorized to act on behalf of a complainant or a party in proceedings governed by this Chapter.

“Restricted permit holder” means a dentist who meets the requirements of A.R.S. § 32-1237 and is issued a restricted permit by the Board.

“Root planing” means a definitive treatment procedure designed to remove cementum or surface dentin that is rough, impregnated with calculus, or contaminated with toxins or microorganisms.

“Scaling” means use of instruments on the crown and root surfaces of the teeth to remove plaque, calculus, and stains from these surfaces.

“Section 1301 permit” means a permit to administer general anesthesia and semi-conscious sedation under Article 13.

“Section 1302 permit” means a permit to administer conscious sedation under Article 13.

“Section 1303 permit” means a permit to administer oral conscious sedation under Article 13.

“Semi-conscious sedation” means use of drug or non-drug methods, or a combination of the two methods, to induce a state of depressed consciousness accompanied by partial loss of protective reflexes, and the inability to continually maintain an airway independently or respond appropriately to physical stimulation or verbal command.

“Specialist” means, for purposes of Article 15 only, a licensee whose practice is limited to one of the following eight specialty categories recognized by the American Dental Association: endodontics, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, prosthodontics, oral pathology, or dental public health.

“Study club” means a group of at least five Arizona licensed dentists, dental hygienists, or denturists who provide written course materials or a written outline for a continuing education presentation that meets the requirements of Article 12.

“Treatment records” means all documentation related directly or indirectly to the dental treatment of a patient.

Historical Note

Adopted effective May 12, 1977 (Supp. 77-3). Former Section R4-11-02 renumbered as Section R4-11-102 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-101 renumbered to R4-11-201, new Section R4-11-101 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Amended by final rulemaking at 9 A.A.R. 1054, effective May 6, 2003 (Supp. 03-1).

R4-11-102. Renumbered

Historical Note

Adopted effective May 12, 1977 (Supp. 77-3). Former Section R4-11-02 renumbered as Section R4-11-102 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-102 renumbered to R4-11-202 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-103. Renumbered

Historical Note

Adopted effective May 12, 1977 (Supp. 77-3). Former Section R4-11-03 renumbered as Section R4-11-103 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-103 renumbered to R4-11-203 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-104. Repealed

Historical Note

Adopted effective May 12, 1977 (Supp. 77-3). Former Section R4-11-04 renumbered as Section R4-11-104

without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-104 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-105. Repealed

Historical Note

Adopted effective May 12, 1977 (Supp. 77-3). Former Section R4-11-05 renumbered as Section R4-11-105 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-105 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 2. LICENSURE BY CREDENTIAL

New Article 2, consisting of Sections R4-11-201 through R4-11-205, made by final rulemaking at 9 A.A.R. 4126, effective November 8, 2003 (Supp. 03-3).

R4-11-201. Clinical Examination; Requirements

A. The Board shall:

1. Consider an application for licensure at the next scheduled Board meeting after the application is administratively complete.
2. If an applicant is applying under A.R.S. §§ 32-1240(A) or 32-1292.01(A), ensure that the applicant has passed the clinical examination of another state or a regional testing agency that maintains a standard of licensure determined by the Board to be substantially equivalent to that of Arizona based on review of any one of the following forms of evidence that are satisfactory to the Board:
 - a. Certified documentation, sent directly from another state or a regional testing agency, that shows the clinical examination or multiple examinations the applicant passed are Board-approved and administered by the state or regional testing agency. The certified documentation shall contain the name of the applicant, date of examination or examinations, total score for each examination, name of any separately-scored component of the examination, and separate scores for each component;
 - b. Certified documentation sent directly from another state dental board that shows the applicant passed that state's clinical examination before that state's participation in a regional examination. The certified documentation shall contain the name of the applicant, date of examination or examinations, total score for each examination, name of any separately-scored component of the examination, and separate scores for each component; or
 - c. A detailed report prepared by a Board-recognized organization capable of assessing whether a clinical examination submitted maintains all of the following clinical examination elements in Arizona's standard of licensure:
 - i. The purposes, interpretations, and uses of the clinical examination are clearly stated in order to make appropriate pass or fail decisions.
 - ii. The knowledge, skills, and abilities that are important in the clinical practice of dentistry or dental hygiene are identified.
 - iii. Examination specifications provide a detailed description of the content of the examination and specify the scorable tasks that are used to evaluate each discipline. The specifications should include scoring weights associated with each content area.
 - iv. Policies and procedures are defined and published to standardize examination administration.

- tion. This administrative protocol addresses legal issues and fair testing practices.
- v. The state or testing agency provides candidates with clear and comprehensive information about the examination program, including application requirements, examination content, performance expectations, reporting of results, and an appeals process.
 - vi. Policies for examiner selection and retention are defined and published.
 - vii. An examiner-training program is established and implemented. The program introduces examiners to appropriate applications of the agency's evaluation criteria and assesses their ability to apply the criteria. The methodology of examiner standardization and its results are documented.
 - viii. Post-examination analyses are routinely conducted. Reliability and other factors affecting validity are investigated.
 - ix. A program is developed and implemented for ongoing evaluation of examiner ratings. The examining agency provides examiners with feedback on their individual rating performance. Policies and procedures are defined for remediation or discontinuance of examiners based on analyses of their performance.
- B.** An applicant shall meet the licensure requirements in R4-11-301 and R4-11-303. The applicant is exempt from complying with R4-11-301(A)(4).

Historical Note

Former Rule 2a; Amended effective November 20, 1979 (Supp. 79-6). Amended effective November 28, 1980 (Supp. 80-6). Former Section R4-11-11 renumbered as Section R4-11-201 and amended effective July 29, 1981 (Supp. 81-4). Former Section R4-11-201 renumbered to R4-11-301, new Section R4-11-201 renumbered from R4-11-101 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Section expired under A.R.S. § 41-1056(E), effective April 30, 2001 (Supp. 01-2). New Section made by final rulemaking at 9 A.A.R. 4126, effective November 8, 2003 (Supp. 03-3).

R4-11-202. Dental Licensure by Credential; Application

- A.** A dentist applying under A.R.S. § 32-1240(A) shall comply with all other applicable requirements in A.R.S. Title 32, Chapter 11 and this Article.
- B.** A dentist applying under A.R.S. § 32-1240(A)(1) shall:
 1. Have a current dental license in another state, territory, or district of the United States;
 2. Submit a written affidavit affirming that the dentist has practiced dentistry for a minimum of 5000 hours during the five years immediately before applying for licensure by credential. For purposes of this subsection, dental practice includes experience as a dental educator at a dental program accredited by the American Dental Association Commission on Dental Accreditation or employment as a dentist in a public health setting;
 3. Submit a written affidavit affirming that the applicant has complied with the continuing dental education requirement of the state in which the applicant is currently licensed; and
 4. Provide evidence regarding the clinical examination by complying with one of the subsections in R4-11-201(A)(2).

- C.** A dentist applying under A.R.S. § 32-1240(A)(2) shall submit certified documentation sent directly from the applicable regional testing agency to the Board that contains the name of applicant, date of examination or examinations, total score for each examination, name of any separately-scored component of the examination, and separate scores for each component.
- D.** For any application submitted under A.R.S. § 32-1240(A), the Board may request additional clarifying evidence required under the applicable subsection in R4-11-201(A)(2).
- E.** An applicant for dental licensure by credential shall pay the fee prescribed in A.R.S. § 32-1240, except the fee is reduced by 50% for applicants who will be employed or working under contract in:
 1. Underserved areas, such as declared or eligible Health Professional Shortage Areas (HPSAs); or
 2. Other facilities caring for underserved populations, as recognized by the Arizona Department of Health Services and approved by the Board.
- F.** An applicant for dental licensure by credential who works in areas or facilities described in subsection (E) shall:
 1. Commit to a three-year, exclusive service period,
 2. File a copy of a contract or employment verification statement with the Board, and
 3. As a licensee, submit an annual contract or employment verification statement to the Board by December 31 of each year.
- G.** A licensee's failure to comply with the requirements in subsection (F) is considered unprofessional conduct and may result in disciplinary action based on the circumstances of the case.

Historical Note

Former Rule 2b; Former Section R4-11-12 renumbered as Section R4-11-202 and amended effective July 29, 1981 (Supp. 81-4). Former Section R4-11-202 repealed, new Section R4-11-202 renumbered from R4-11-102 and the heading amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Labeling changes made to reflect current style requirements (Supp. 99-1). Section expired under A.R.S. § 41-1056(E), effective April 30, 2001 (Supp. 01-2). New Section made by final rulemaking at 9 A.A.R. 4126, effective November 8, 2003 (Supp. 03-3).

R4-11-203. Dental Hygienist Licensure by Credential; Application

- A.** A dental hygienist applying under A.R.S. § 32-1292.01(A) shall:
 1. Comply with all other applicable requirements in A.R.S. Title 32, Chapter 11 and this Article; and
 2. Not be the subject of final or pending disciplinary action in any state, territory, or district of the United States or have resigned or surrendered a license while under investigation by or while disciplinary action was pending before any professional licensing agency.
- B.** The Board shall:
 1. Suspend an application for licensure by credential if disciplinary action by a dental regulatory agency against the applicant is currently pending in another jurisdiction, and
 2. Not issue or deny licensure by credential to the applicant until the matter is resolved.
- C.** A dental hygienist applying under A.R.S. § 32-1292.01(A)(1) shall:
 1. Have a current dental hygienist license in another state, territory, or district of the United States;
 2. Submit a written affidavit affirming that the applicant has practiced as a dental hygienist for a minimum of 1000 hours during the two years immediately before applying

for licensure by credential. For purposes of this subsection, dental hygienist practice includes experience as a dental hygienist educator at a dental program accredited by the American Dental Association Commission on Dental Accreditation or employment as a dental hygienist in a public health setting;

3. Submit a written affidavit affirming that the applicant has complied with the continuing dental hygienist education requirement of the state in which the applicant is currently licensed; and
4. Provide evidence regarding the clinical examination by complying with one of the subsections in R4-11-201(A)(2).

- D.** A dental hygienist applying under A.R.S. § 32-1292.01(A)(2) shall submit certified documentation sent directly from the applicable regional testing agency to the Board that contains the name of applicant, date of examination or examinations, total score for each examination, name of any separately-scored component of the examination, and separate scores for each component.
- E.** For any application submitted under A.R.S. § 32-1292.01(A), the Board may request additional clarifying evidence required under the applicable subsection in R4-11-201(A)(2).
- F.** An applicant for dental hygienist licensure by credential shall pay the fee prescribed in A.R.S. § 32-1292.01, except the fee is reduced by 50% for applicants who will be employed or working under contract in:
1. Underserved areas, such as declared or eligible Health Professional Shortage Areas (HPSAs); or
 2. Other facilities caring for underserved populations, as recognized by the Arizona Department of Health Services and approved by the Board.
- G.** An applicant for dental hygienist licensure by credential who works in areas or facilities described in subsection (F) shall:
1. Commit to a three-year, exclusive service period,
 2. File a copy of a contract or employment verification statement with the Board, and
 3. As a licensee, submit an annual contract or employment verification statement to the Board by December 31 of each year.
- H.** A licensee's failure to comply with the requirements in R4-11-203(G) is considered unprofessional conduct and may result in disciplinary action based on the circumstances of the case.

Historical Note

Former Rule 2c; Former Section R4-11-13 repealed, new Section R4-11-13 adopted effective November 20, 1979 (Supp. 79-6). Amended effective October 30, 1980 (Supp. 80-5). Former Section R4-11-13 renumbered as Section R4-11-203 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-203 renumbered to R4-11-302, new Section R4-11-203 renumbered from R4-11-103 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Section expired under A.R.S. § 41-1056(E), effective April 30, 2001 (Supp. 01-2). New Section made by final rulemaking at 9 A.A.R. 4126, effective November 8, 2003 (Supp. 03-3).

R4-11-204. Dental Assistant Radiography Certification by Credential

Eligibility. To be eligible for dental assistant radiography certification by credential, an applicant shall have a current certificate or other form of approval for taking dental radiographs, issued by a professional licensing agency in another jurisdiction of the United States that required successful completion of written and clinical

dental radiography examinations or a single dental radiography examination with written and clinical components.

Historical Note

Former Rule 2d; Former Section R4-11-14 repealed, new Section R4-11-14 adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-14 renumbered as Section R4-11-204, repealed, and new Section R4-11-204 adopted effective July 29, 1981 (Supp. 81-4). Former Section R4-11-204 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). New Section made by final rulemaking at 9 A.A.R. 4126, effective November 8, 2003 (Supp. 03-3).

R4-11-205. Application for Dental Assistant Radiography Certification by Credential

- A.** An applicant for dental assistant radiography certification by credential shall provide to the Board a completed application, on a form furnished by the Board that contains the following information:
1. A sworn statement of the applicant's eligibility, and
 2. A letter of endorsement that verifies compliance with R4-11-204.
- B.** Based upon review of information provided under subsection (A), the Board or its designee shall request that an applicant for dental assistant radiography certification by credential provide a copy of a certified document that indicates the reason for a name change if the applicant's documentation contains different names.

Historical Note

Former Rule 2e; Former Section R4-11-15 renumbered as Section R4-11-205 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-205 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). New Section made by final rulemaking at 9 A.A.R. 4126, effective November 8, 2003 (Supp. 03-3).

R4-11-206. Repealed

Historical Note

Former Rule 2f; Amended as an emergency effective July 7, 1978, pursuant to A.R.S. § 41-1003, valid for only 90 days (Supp. 78-4). Former emergency adoption now adopted and amended effective September 7, 1979 (Supp. 79-5). Former Section R4-11-16 renumbered as Section R4-11-206 and amended effective July 29, 1981 (Supp. 81-4). Former Section R4-11-206 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-207. Repealed

Historical Note

Former Rule 2g; Former Section R4-11-17 renumbered as Section R4-11-207, repealed, and new Section R4-11-207 adopted effective July 29, 1981 (Supp. 81-4). Former Section R4-11-207 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-208. Repealed

Historical Note

Former Section R4-11-20 repealed, new Section R4-11-20 adopted effective May 12, 1977 (Supp. 77-3). Amended effective October 30, 1980 (Supp. 80-5). Former Section R4-11-20 renumbered as Section R4-11-208 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-208 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-209. Repealed**Historical Note**

Adopted effective March 23, 1976 (Supp. 76-2). Former Section R4-11-19 renumbered as R4-11-209 and repealed. Former Section R4-11-21 renumbered as Section R4-11-209 and amended effective July 29, 1981 (Supp. 81-4). Former Section R4-11-209 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-210. Repealed**Historical Note**

Adopted effective March 23, 1976 (Supp. 76-2). Amended effective June 7, 1978 (Supp. 78-3). Former Section R4-11-22 renumbered as Section R4-11-210 and amended effective July 29, 1981 (Supp. 81-4). Former Section R4-11-210 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-211. Repealed**Historical Note**

Adopted effective August 26, 1977 (Supp. 77-4). Former Section R4-11-23 renumbered as Section R4-11-211 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-211 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-212. Repealed**Historical Note**

Adopted effective March 28, 1978 (Supp. 78-2). Former Section R4-11-24 renumbered as Section R4-11-212 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-212 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-213. Repealed**Historical Note**

Adopted as an emergency effective July 7, 1978, pursuant to A.R.S. § 41-1003, valid for only 90 days (Supp. 78-4). Former emergency adoption now adopted effective September 7, 1979 (Supp. 79-5). Former Section R4-11-25 renumbered as Section R4-11-213, repealed, and new Section R4-11-213 adopted effective July 29, 1981 (Supp. 81-4). Former Section R4-11-213 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-214. Repealed**Historical Note**

Former Rule 2h; Amended effective March 23, 1976 (Supp. 76-2). Former Section R4-11-18 renumbered as Section R4-11-214 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-214 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-215. Repealed**Historical Note**

Adopted effective June 16, 1982 (Supp. 82-3). Former Section R4-11-215 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-216. Repealed**Historical Note**

Adopted effective June 16, 1982 (Supp. 82-3). Former Section R4-11-216 repealed by final rulemaking at 5

A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 3. EXAMINATIONS, LICENSING QUALIFICATIONS, APPLICATION AND RENEWAL, TIME-FRAMES

R4-11-301. Application

- A.** An applicant shall provide the following information and documentation on a form provided by the Board:
1. A sworn statement of the applicant's qualifications;
 2. A photograph of the applicant that is no more than six months old;
 3. An official, sealed transcript sent directly from the applicant's dental, dental hygiene, or denture technology school to the Board;
 4. A copy of the certificate from the Western Regional Examining Board, indicating that the applicant passed the Western Regional Examining Board examination within the five years immediately preceding the date the application was filed with the Board;
 5. An official score card sent directly from the National Board examination to the Board;
 6. A copy of the applicant's cardiopulmonary resuscitation certification, indicating the expiration date;
 7. A letter of endorsement from any other jurisdiction in which an applicant is licensed, sent directly from that jurisdiction to the Board;
 8. A copy of the self-inquiry from the National Practitioner Data Bank that is no more than six months old;
 9. A letter of endorsement from the dental, dental hygiene, or dental technology school from which the applicant graduated if the applicant is a new graduate or has been practicing less than six months;
 10. A letter of endorsement from the applicant's commanding officer or superior if the applicant is in the military or employed by the United States government; and
 11. The jurisprudence examination fee.
- B.** The Board may request that an applicant provide:
1. An official copy of the applicant's dental, dental hygiene, or dental technology school diploma,
 2. A copy of a certified document which indicates the reason for a name change if the applicant's application contains different names,
 3. Written verification of the applicant's work history, and
 4. A copy of a high school diploma or equivalent certificate.
- C.** An applicant shall pass the Arizona jurisprudence examination.

Historical Note

Former Rule 3A; Former Section R4-11-29 repealed, new Section R4-11-29 adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-29 renumbered as Section R4-11-301 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-301 repealed, new Section R4-11-301 renumbered from R4-11-201 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-302. Determination of Successful Completion of Licensure Examination

To determine the minimum passing grade in all examinations conducted by the Board:

1. The Board may require a composite average of 75% for successful completion of the examination; or
2. The Board may use a performance rating of 0 to 6 to evaluate each procedure performed and require a specific point total to achieve successful completion.

3. The Board shall vote, at least 30 days before the examination, to determine which scoring system is to be used. For the percentage system the Board shall also determine the relative values of the individual procedures tested. For the proficiency evaluation the Board shall determine the minimum point total required to successfully complete the examination.

Historical Note

Former Rule 3B; Former Section R4-11-30 repealed, new Section R4-11-30 adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-30 renumbered as Section R4-11-302 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-302 repealed, new Section R4-11-302 renumbered from R4-11-203 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-303. Application Processing Procedures: Issuance, Denial, and Renewal of Dental Licenses, Restricted Permits, Dental Hygiene Licenses, Denturist Certificates, and Dispensing Registrations

- A. Within 14 calendar days of receiving an initial or renewal application for a dental license, restricted permit, dental hygiene license, denturist certificate, or dispensing registration, the Board shall notify the applicant, in writing, that the application package is complete or incomplete. If the package is incomplete, the notice shall specify what information is missing.
- B. An applicant with an incomplete package shall supply the missing information within 60 calendar days from the date of the notice. If the applicant fails to do so, an applicant shall begin the application process anew.
- C. Upon receipt of all missing information, the Board shall notify the applicant, in writing, within 10 calendar days, that the application is complete.
- D. The Board shall not process an application until the applicant has fully complied with the requirements of this Article.
- E. The Board shall notify an applicant, in writing, whether an initial license or renewal governed by this Section is granted or denied, no later than 90 calendar days after the date of the notice advising the applicant that the package is complete.
- F. The Board may deny a license or renewal governed by this Section for any of the reasons stated in A.R.S. Title 32, Chapter 11, or if the applicant:
 1. Fails to provide complete documentation;
 2. Provides false or misleading information; or
 3. Fails to meet the requirements of A.R.S. Title 32, Chapter 11, or this Chapter.
- G. The notice of denial shall inform the applicant of the following:
 1. Each reason for the denial, with citations to the statutes or rules on which the denial is based;
 2. The applicant's right to request a hearing on the denial, including the number of days the applicant has to file the request;
 3. The applicant's right to request an informal settlement conference under A.R.S. § 41-1092.06; and
 4. The name and telephone number of an agency contact person who can answer questions regarding the application process.
- H. The following time-frames apply for an initial or renewal application governed by this Section:
 1. Administrative completeness review time-frame: 24 calendar days.
 2. Substantive review time-frame: 90 calendar days.

3. Overall time-frame: 114 calendar days.

- I. An applicant whose license is denied has a right to a hearing, an opportunity for rehearing, and, if the denial is upheld, may seek judicial review pursuant to A.R.S. Title 41, Chapter 6, Article 10, and A.R.S. Title 12, Chapter 7, Article 6.

Historical Note

Former Rule 3C; Former Section R4-11-31 renumbered as Section R4-11-303 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-303 repealed, new Section R4-11-303 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-304. Application Processing Procedures: Issuance and Denial of Dental Assistant Certificates

- A. Within 14 calendar days of receiving an application from an applicant for a dental assistant certificate, the Board or its designee shall notify the applicant, in writing, that the application package is complete or incomplete. If the package is incomplete, the notice shall specify what information is missing.
- B. An applicant with an incomplete package shall supply the missing information within 60 calendar days from the date of the notice. If the applicant fails to do so, an applicant shall begin the application process anew.
- C. Upon receipt of all missing information, within 10 calendar days, the Board or its designee shall notify the applicant, in writing, that the application is complete.
- D. The Board or its designee shall not process an application until the applicant has fully complied with the requirements of this Article.
- E. The Board or its designee shall notify an applicant, in writing, whether the certificate is granted or denied, no later than 90 calendar days after the date of the notice advising the applicant that the package is complete.
- F. The Board or its designee shall deny certification if an applicant fails the clinical or written portions of the Dental Assisting National Board examination.
- G. The notice of denial shall inform the applicant of the following:
 1. The reason for the denial, with a citation to the statute or rule which requires the applicant to pass the examination;
 2. The applicant's right to request a hearing on the denial, including the number of days the applicant has to file the request;
 3. The applicant's right to request an informal settlement conference under A.R.S. § 41-1092.06; and
 4. The name and telephone number of an agency contact person or a designee who can answer questions regarding the application process.
- H. The following time-frames apply for certificate applications governed by this Section:
 1. Administrative completeness review time-frame: 24 calendar days.
 2. Substantive review time-frame: 90 calendar days.
 3. Overall time-frame: 114 calendar days.
- I. An applicant whose certificate is denied has a right to a hearing, an opportunity for rehearing, and, if the denial is upheld, may seek judicial review pursuant to A.R.S. Title 41, Chapter 6, Article 10, and A.R.S. Title 12, Chapter 7, Article 6.

Historical Note

Former Rule 3D; Former Section R4-11-32 renumbered as Section R4-11-304 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-304 repealed, new Section R4-11-304 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-305. Application Processing Procedures: Issuance, Denial, and Renewal of General Anesthesia and Semi-conscious Sedation Permits, and Conscious Sedation Permits

- A.** Within 14 calendar days of receiving an initial or renewal application for a general anesthesia and semi-conscious sedation permit or a conscious sedation permit, the Board shall notify the applicant, in writing, that the application package is complete or incomplete. If the package is incomplete, the notice shall specify what information is missing.
- B.** An applicant with an incomplete package shall supply the missing information within 60 calendar days from the date of the notice. If the applicant fails to do so, an applicant shall begin the application process anew.
- C.** Upon receipt of all missing information, the Board shall notify the applicant, in writing, within 10 calendar days, that the application is complete.
- D.** The Board shall not process an application until the applicant has fully complied with the requirements of this Article.
- E.** The Board shall notify an applicant, in writing, whether the initial permit or renewal governed by this Section is granted or denied, no later than 120 calendar days after the date of the notice advising the applicant that the package is complete.
- F.** The Board may deny a permit or renewal governed by this Section for any of the reasons stated in A.R.S. Title 32, Chapter 11, or if the applicant:
 1. Fails to provide complete documentation;
 2. Provides false or misleading information; or
 3. Fails to meet the requirements of A.R.S. Title 32, Chapter 11 or this Chapter.
- G.** The notice of denial shall inform the applicant of the following:
 1. Each reason for the denial, with citations to the statutes or rules on which the denial is based;
 2. The applicant's right to request a hearing on the denial, including the number of days the applicant has to file the request;
 3. The applicant's right to request an informal settlement conference under A.R.S. § 41-1092.06; and
 4. The name and telephone number of an agency contact person who can answer questions regarding the application process.
- H.** The following time-frames apply for an initial or renewal application governed by this Section:
 1. Administrative completeness review time-frame: 24 calendar days.
 2. Substantive review time-frame: 120 calendar days.
 3. Overall time-frame: 144 calendar days.

Historical Note

New Section R4-11-305 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 4. FEES**R4-11-401. Licensure Fees**

- A.** Dentist:
 1. Initial licensure (prorated according to A.R.S. § 32-1236(B)): \$450.00.
 2. Licensure renewal: \$450.00.
 3. Retired or disabled licensure renewal: \$15.00.
- B.** Dental Hygienist:
 1. Initial licensure (prorated according to A.R.S. § 32-1287(B)): \$225.00.
 2. Licensure renewal: \$225.00.
 3. Retired or disabled licensure renewal: \$15.00.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1).

Amended effective March 23, 1976 (Supp. 76-2). Former Section R4-11-42 renumbered as Section R4-11-401 and repealed effective July 29, 1981 (Supp. 81-4). Adopted effective February 16, 1995 (Supp. 95-1). Former Section R4-11-401 repealed, new Section R4-11-401 renumbered from R4-11-901 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Section repealed; new Section adopted by final rulemaking at 6 A.A.R. 748, effective February 2, 2000 (Supp. 00-1).

R4-11-402. Denturist Certification Fees

- A.** Initial certification (prorated according to A.R.S. § 32-1297.06(B)): \$225.00.
- B.** Certification renewal: \$225.00.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1). Amended effective March 23, 1976 (Supp. 76-2). Former Section R4-11-43 renumbered as Section R4-11-402, repealed, and new Section R4-11-402 adopted effective July 29, 1981 (Supp. 81-4). Amended effective February 16, 1995 (Supp. 95-1). Former Section R4-11-402 renumbered to R4-11-601, new Section R4-11-402 renumbered from R4-11-902 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Section repealed; new Section adopted by final rulemaking at 6 A.A.R. 748, effective February 2, 2000 (Supp. 00-1).

R4-11-403. Examination Fees

- A.** Arizona Dental Jurisprudence examination:
 1. Dentist: \$200.00.
 2. Dental Hygienist: \$50.00.
- B.** Denturist Certification examination: \$150.00.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1). Former Section R4-11-44 renumbered as Section R4-11-403 and repealed effective July 29, 1981 (Supp. 81-4). Adopted effective February 16, 1995 (Supp. 95-1). Former Section R4-11-403 renumbered to R4-11-602, new Section R4-11-403 renumbered from R4-11-903 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Section repealed; new Section adopted by final rulemaking at 6 A.A.R. 748, effective February 2, 2000 (Supp. 00-1).

R4-11-404. Penalty Fees for Late Renewal

- A.** License: \$25.00.
- B.** Certificate: \$25.00.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1). Former Section R4-11-45 renumbered as Section R4-11-404 without change effective July 29, 1981 (Supp. 81-4). Repealed effective February 16, 1995 (Supp. 95-1). New Section R4-11-404 renumbered from R4-11-904 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Amended by final rulemaking at 6 A.A.R. 748, effective February 2, 2000 (Supp. 00-1).

R4-11-405. Other Fees

- A.** Duplicate license: \$25.00.
- B.** Duplicate certificate: \$25.00.
- C.** License verification:
 1. For licensee: \$25.00.
 2. For non-licensee: \$5.00.
- D.** Copy of tape recording: \$10.00.

- E. Photocopies (per page): \$0.25.
- F. Mailing lists:
 - 1. Dentists:
 - a. In-state - paper or labels: \$150.00.
 - b. All licensees - paper or labels: \$175.00.
 - c. Computer disk: \$100.00
 - 2. Dental hygienists:
 - a. In-state - paper or labels: \$150.00.
 - b. All licensees - paper or labels: \$175.00.
 - c. Computer disk: \$100.00.
 - 3. Denturists: All certificate holders - paper or labels: \$5.00.
- G. Board meeting agendas and minutes (mailed directly to consumer):
 - 1. Agendas and minutes (annual fee): \$75.00.
 - 2. Agendas only (annual fee): \$25.00.
 - 3. Minutes only (annual fee): \$50.00.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1).
 Former Section R4-11-46 repealed, new Section R4-11-46 adopted effective March 23, 1976 (Supp. 76-2).
 Former Section R4-11-46 renumbered as Section R4-11-405 without change effective July 29, 1981 (Supp. 81-4).
 Repealed effective February 16, 1995 (Supp. 95-1). New Section R4-11-405 renumbered from R4-11-905 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Amended by final rulemaking at 6 A.A.R. 748, effective February 2, 2000 (Supp. 00-1).

R4-11-406. Fees for Anesthesia and Sedation Permits

- A. Under A.R.S. § 32-1207(D), the fee for a Section 1301 permit to administer general anesthesia and semi-conscious sedation or a Section 1302 or Section 1303 permit to administer conscious or oral conscious sedation is \$300 per location.
- B. Upon successful completion of the initial onsite evaluation and upon receipt of the required permit fee, the Board shall issue a separate Section 1301, 1302, or 1303 permit to a dentist for each location requested by the dentist. A permit expires on December 31 of every third year.
- C. The renewal fee for each Section 1301, 1302, or 1303 permit is \$300 per location.

Historical Note

Adopted effective March 23, 1976 (Supp. 76-2). Former Section R4-11-47 renumbered as Section R4-11-406 without change effective July 29, 1981 (Supp. 81-4).
 Repealed effective February 16, 1995 (Supp. 95-1). New Section R4-11-406 renumbered from R4-11-906 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Section repealed; new Section R4-11-406 renumbered from R4-11-407 and amended by final rulemaking at 6 A.A.R. 748, effective February 2, 2000 (Supp. 00-1). Amended by final rulemaking at 9 A.A.R. 4130, effective November 8, 2003 (Supp. 03-3).

R4-11-407. Renumbered**Historical Note**

Adopted effective March 23, 1976 (Supp. 76-2). Former Section R4-11-48 renumbered as Section R4-11-407 without change effective July 29, 1981 (Supp. 81-4).
 Repealed effective February 16, 1995 (Supp. 95-1). New Section R4-11-407 renumbered from R4-11-909 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Section R4-11-407 renumbered to R4-11-406 by final rulemaking at 6 A.A.R. 748, effective February 2, 2000 (Supp. 00-1).

R4-11-408. Repealed**Historical Note**

Adopted effective March 23, 1976 (Supp. 76-2). Former Section R4-11-49 renumbered as Section R4-11-408 without change effective July 29, 1981 (Supp. 81-4).
 Repealed effective February 16, 1995 (Supp. 95-1).

R4-11-409. Repealed**Historical Note**

Adopted effective September 12, 1985 (Supp. 85-5).
 Repealed effective July 21, 1995 (Supp. 95-3).

ARTICLE 5. DENTISTS**R4-11-501. Dentist of Record**

- A. A dentist shall ensure that each patient record card has the treatment records for a patient treated in any dental office, clinic, hospital dental clinic, or charitable institution dental clinic, and the full name of a dentist in the office, clinic, hospital dental clinic or charitable dental clinic who is responsible for all of the patient's treatment.
- B. A dentist of record shall obtain a patient's consent to change the treatment plan that the patient originally agreed to and incur additional costs.
- C. A dentist of record who leaves the practice of dentistry, or a practice in which the dentist is the dentist of record on specific patient records, shall ensure that a new dentist of record is entered on each patient record card.
- D. A dentist of record remains responsible for the care given to the patient while the dentist was the dentist of record even after being replaced by another dentist.
- E. A dentist of record shall remain responsible for the care of a patient during the course of treatment and shall be available to the patient through the dentist's office, an emergency number, an answering service, or a substituting dentist. Lack of availability to the patient on an emergency basis constitutes abandonment, and the dentist is subject to disciplinary action for such unprofessional conduct pursuant to A.R.S. Title 32, Chapter 11, Article 3.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1).
 Former Section R4-11-62 renumbered as Section R4-11-501 without change effective July 29, 1981 (Supp. 81-4).
 Former Section R4-11-501 repealed, new Section R4-11-501 renumbered from R4-11-1102 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-502. Renumbered**Historical Note**

Adopted effective December 6, 1974 (Supp. 75-1).
 Amended effective March 23, 1976 (Supp. 76-2). Former Section R4-11-63 renumbered as Section R4-11-502 without change effective July 29, 1981 (Supp. 81-4).
 Former Section R4-11-502 renumbered to R4-11-701 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-503. Repealed**Historical Note**

Adopted effective December 6, 1974 (Supp. 75-1).
 Former Section R4-11-64 repealed, new Section R4-11-64 adopted effective March 23, 1976 (Supp. 76-2).
 Former Section R4-11-64 renumbered as Section R4-11-503 without change effective July 29, 1981 (Supp. 81-4).

Former Section R4-11-503 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-504. Renumbered

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1).
Former Section R4-11-65 repealed, new Section R4-11-65 adopted effective May 23, 1976 (Supp. 76-2). Former Section R4-11-65 renumbered as Section R4-11-504, repealed, and new Section R4-11-504 adopted effective July 29, 1981 (Supp. 81-4). Former Section R4-11-504 renumbered to R4-11-702 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-505. Repealed

Historical Note

Adopted effective March 23, 1976 (Supp. 76-2). Former Section R4-11-66 renumbered as Section R4-11-505 and repealed effective July 29, 1981 (Supp. 81-4).

R4-11-506. Repealed

Historical Note

Adopted effective March 23, 1976 (Supp. 76-2). Former Section R4-11-67 renumbered as Section R4-11-506 and repealed effective July 29, 1981 (Supp. 81-4).

ARTICLE 6. DENTAL HYGIENISTS

R4-11-601. Duties and Qualifications

- A.** A dental hygienist may apply preventative and therapeutic agents under the general supervision of a licensed dentist.
- B.** A dental hygienist may perform a procedure not specifically authorized by A.R.S. § 32-1281 when all of the following conditions are satisfied:
 1. The procedure is recommended or prescribed by the supervising dentist;
 2. The hygienist has received instruction, training, or education to perform the procedure in a safe manner; and
 3. The procedure is performed under the general supervision of a licensed dentist.
- C.** The Board shall ensure that a dental hygienist is qualified to administer local anesthesia and nitrous oxide analgesia as authorized by A.R.S. § 32-1281(F)(1) and (2), by requiring evidence that the hygienist has completed courses in techniques taught at a recognized dental hygiene school or recognized dental school, as defined in A.R.S. § 32-1201(14) and (15), which consist of a minimum of 36 clock hours of instruction, and has passed examinations in theoretical knowledge and clinical competency in the following subject areas:
 1. Review of head and neck anatomy;
 2. Pharmacology of anesthetic and analgesic agents;
 3. Medical - dental history considerations;
 4. Emergency procedures;
 5. Selection of appropriate armamentarium and agents;
 6. Nitrous oxide administration;
 7. Clinical practice, under direct supervision, as defined in A.R.S. § 32-1281(H)(1), including at least three experiences administering each of the following:
 - a. Posterior superior alveolar injection,
 - b. Middle superior alveolar injection,
 - c. Anterior superior alveolar injection,
 - d. Nasopalatine injection,
 - e. Greater - palatine injection,
 - f. Inferior alveolar nerve injection,
 - g. Lingual injection,
 - h. Mental injection,
 - i. Long buccal injections, and

j. Nitrous oxide analgesia.

- D.** In addition to the recognized course of study described in subsection (C), the hygienist shall successfully complete the examination in local anesthesia given by the Western Regional Examining Board. The hygienist shall submit proof of the successful completion of the local anesthesia examination to the Board. The Board shall then issue a Local Anesthesia Certificate.
- E.** For purposes of qualification of a dental hygienist to place interrupted sutures as authorized by A.R.S. § 32-1281(F)(3), the Board recognizes courses in advanced periodontal therapy offered by a recognized dental hygiene school or a recognized dental school, as defined in A.R.S. § 32-1201(14) and (15), which consist of a minimum of 200 clock hours of instruction and successful completion of those examinations of a theoretical knowledge and clinical competency in the following subject areas:
 1. A review of oral histology,
 2. Inflammation and pathogenesis of a periodontal pocket,
 3. Patient assessment,
 4. Dental hygiene treatment planning,
 5. Advanced root planing and debridement,
 6. Subgingival curettage,
 7. Suturing,
 8. Wound repair and new attachment, and
 9. Clinical experience in each of the following:
 - a. Root planing,
 - b. Subgingival curettage,
 - c. Suturing.
- F.** The hygienist shall submit proof of the successful completion of a recognized course in advanced periodontal therapy, as described in subsection (E), to the Board. The Board shall then issue a certification sticker for Suture Placement, which shall be affixed to the hygienist's license.
- G.** Dental hygienists shall not perform an irreversible procedure.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1).
Former Section R4-11-82 renumbered as Section R4-11-601 without change effective July 29, 1981 (Supp. 81-4).
Former Section R4-11-601 repealed, new Section R4-11-601 renumbered from R4-11-402 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-602. Care of Homebound Patients

Dental hygienists treating homebound patients shall provide only treatment prescribed by the dentist of record in the diagnosis and treatment plan. The diagnosis and treatment plan shall be based on examination data obtained not more than 12 months before the treatment is administered.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1).
Former Section R4-11-83 renumbered as Section R4-11-602 without change effective July 29, 1981 (Supp. 81-4).
Former Section R4-11-602 renumbered to R4-11-1001, new Section R4-11-602 renumbered from R4-11-403 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-603. Limitation on Number Supervised

A dentist shall not supervise more than three dental hygienists at a time.

Historical Note

Adopted effective December 6, 1974 (Supp. 75-1).
Former Section R4-11-84 renumbered as Section R4-11-603 without change effective July 29, 1981 (Supp. 81-4).

Former Section R4-11-603 renumbered to R4-11-1002, new Section R4-11-603 renumbered from R4-11-408 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-604. Selection Committee and Process

- A.** The Board shall appoint a selection committee to screen candidates for the dental hygiene committee. The selection committee consists of three members. The Board shall appoint at least two members who are dental hygienists and one member who is a current Board member. The Board shall fill any vacancy for the unexpired portion of the term.
- B.** Each selection committee member's term is one year.
- C.** By majority vote, the selection committee shall nominate each candidate for the dental hygiene committee and transmit a list of names to the Board for approval, including at least one alternate.

Historical Note

New Section R4-11-604 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-605. Dental Hygiene Committee

- A.** The Board shall appoint seven members to the dental hygiene committee as follows:
 - 1. One dentist appointed at the annual December Board meeting, currently serving as a Board member, for a one year term;
 - 2. One dental hygienist appointed at the annual December Board meeting, currently serving as a Board member and possessing the qualifications required in Article 6, for a one-year term;
 - 3. Four dental hygienists that possess the qualifications required in Article 6; and
 - 4. One lay person.
- B.** Except for members appointed as prescribed in subsections (A)(1) and (2), the Board shall appoint dental hygiene committee members for staggered terms of three years, beginning January 1, 1999, and limit each member to two consecutive terms. The Board shall fill any vacancy for the unexpired portion of the term.
- C.** The dental hygiene committee shall annually elect a chairperson at the first meeting convened during the calendar year.

Historical Note

New Section R4-11-605 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-606. Candidate Qualifications and Submissions

- A.** A dental hygienist who seeks membership on the dental hygiene committee shall possess a license in good standing, issued by the Board.
- B.** A dental hygienist who is not a Board member and qualifies under subsection (A) shall submit a letter of intent and resume to the Board.
- C.** The selection committee shall consider all of the following criteria when nominating a candidate for the dental hygiene committee:
 - 1. Geographic representation,
 - 2. Experience in postsecondary curriculum analysis and course development,
 - 3. Public health experience, and
 - 4. Dental hygiene clinical experience.

Historical Note

New Section R4-11-606 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-607. Duties of the Dental Hygiene Committee

- A.** The committee shall advise the Board on all matters relating to the regulation of dental hygienists.
- B.** In performing the duty in subsection (A), the committee may:
 - 1. Act as a liaison for the Board, promoting communication and providing a forum for discussion of dental hygiene regulatory issues;
 - 2. Review applications, syllabi, and related materials and make recommendations to the Board regarding certification of courses in local anesthesia, nitrous oxide analgesia, and suture placement under Article 6 and other procedures which may require certification under Article 6;
 - 3. Review documentation submitted by dental hygienists to determine compliance with the continuing education requirement for license renewal under Article 12 and make recommendations to the Board regarding compliance;
 - 4. Make recommendations to the Board concerning statute and rule development which affect dental hygienists' education, licensure, regulation, or practice;
 - 5. Provide advice to the Board on standards and scope of practice which affect dental hygiene practice;
 - 6. Provide ad hoc committees to the Board upon request;
 - 7. Request that the Board consider recommendations of the committee at the next regularly scheduled Board meeting; and
 - 8. Make recommendations to the Board for approval of dental hygiene consultants.
- C.** Committee members who are licensed dentists or dental hygienists may serve as Western Regional Examining Board (WREB) examiners or Board consultants.
- D.** The committee shall meet at least two times per calendar year. The chairperson or the president of the Board, or their respective designees, may call a meeting of the committee.
- E.** The Board may assign additional duties to the committee.

Historical Note

New Section R4-11-607 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-608. Dental Hygiene Consultants

After submission of a current curriculum vitae or resume and approval by the Board, dental hygiene consultants may:

- 1. Act as Western Regional Examining Board (WREB) examiners for the clinical portion of the dental hygiene examination;
- 2. Act as Western Regional Examining Board (WREB) examiners for the local anesthesia portion of the dental hygiene examination;
- 3. Participate in Board-related procedures, including clinical evaluations, investigation of complaints concerning infection control, insurance fraud, or the practice of supervised personnel, and any other procedures not directly related to evaluating a dentist's quality of care; and
- 4. Participate in onsite office evaluations for infection control, as part of a team.

Historical Note

New Section R4-11-608 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 7. DENTAL ASSISTANTS

R4-11-701. Procedures and Functions Performed by a Dental Assistant under Supervision

- A.** A dental assistant may perform the following procedures and functions under the direct supervision of a licensed dentist:

1. Place dental material into a patient's mouth in response to a licensed dentist's instruction;
2. Cleanse the supragingival surface of the tooth in preparation for:
 - a. The placement of bands, crowns, and restorations;
 - b. Dental dam application;
 - c. Acid etch procedures; and
 - d. Removal of dressings and packs;
3. Remove excess cement from inlays, crowns, bridges, and orthodontic appliances with hand instruments;
4. Remove temporary cement, interim restorations, and periodontal dressings with hand instruments;
5. Remove sutures;
6. Place and remove dental dams and matrix bands;
7. Fabricate and place interim restorations with temporary cement;
8. Apply sealants;
9. Apply topical fluorides;
10. Prepare a patient for nitrous oxide and oxygen analgesia administration upon the direct instruction and presence of a dentist; or
11. Observe a patient during nitrous oxide and oxygen analgesia as instructed by the dentist.

B. A dental assistant may perform the following procedures and functions under the general supervision of a licensed dentist:

1. Train or instruct patients in oral hygiene techniques, preventive procedures, dietary counseling for caries and plaque control, and provide pre-and post-operative instructions relative to specific office treatment;
2. Collect and record information pertaining to extraoral conditions; and
3. Collect and record information pertaining to existing intraoral conditions.

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-100 renumbered as Section R4-11-701 and amended effective July 29, 1981 (Supp. 81-4). Former Section R4-11-701 renumbered to R4-11-1701, new Section R4-11-701 renumbered from R4-11-502 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-702. Limitations on Procedures or Functions Performed by a Dental Assistant under Supervision

A dental assistant shall not perform the following procedures or functions:

1. A procedure which by law only licensed dentists, licensed dental hygienists, or certified denturists can perform;
2. Intraoral carvings of dental restorations or prostheses;
3. Final jaw registrations;
4. Taking final impressions for any activating orthodontic appliance, fixed or removable prosthesis;
5. Activating orthodontic appliances; or
6. An irreversible procedure.

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-101 renumbered as Section R4-11-702 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-702 repealed, new Section R4-11-702 renumbered from R4-11-504 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-703. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-102 renumbered as Section R4-11-703 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-703 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-704. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-103 renumbered as Section R4-11-704 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-704 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-705. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-104 renumbered as Section R4-11-705 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-705 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-706. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-105 renumbered as Section R4-11-706 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-706 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-707. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-106 renumbered as Section R4-11-707 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-707 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-708. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-107 renumbered as Section R4-11-708 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-708 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-709. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-108 renumbered as Section R4-11-709 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-709 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-710. Repealed

Historical Note

Adopted effective April 27, 1977 (Supp. 77-2). Former Section R4-11-109 renumbered as Section R4-11-710 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-710 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 8. DENTURISTS**R4-11-801. Consultants to the Board**

- A. The Board shall appoint five certified denturists to assist and advise the Board regarding complaints, disciplinary actions, and examinations concerning denturists.
- B. The Board of Dental Examiners shall appoint an examining team for each denturist certification examination pursuant to A.R.S. § 32-1297.02.
- C. The examining team shall administer and grade the examination as required by A.R.S. § 32-1297.02 and shall make recommendations to the Board for certification of those who successfully completed the examination.

Historical Note

Adopted effective March 28, 1978 (Supp. 78-2). Former Section R4-11-120 renumbered as Section R4-11-801 without change effective July 29, 1981 (Supp. 81-4). Section R4-11-801 repealed, new Section filed April 4, 1986, adopted effective January 1, 1988 (Supp. 86-2). Amended effective May 17, 1995 (Supp. 95-2). Former Section R4-11-801 repealed, new Section R4-11-801 renumbered from R4-11-1201 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-802. Recognition of Schools of Denture Technology

- A. The Board shall use the criteria in Article 2 to determine whether to recognize a denture technology school.
- B. The basic curriculum to recognize a program in denture technology shall contain those courses and number of course hours delineated in A.R.S. § 32-1297(C) and may include the following subjects: partial denture techniques, cardiopulmonary resuscitation, x-ray interpretation, jurisprudence, and practice management.

Historical Note

Adopted effective March 28, 1978 (Supp. 78-2). Former Section R4-11-121 renumbered as Section R4-11-802 without change effective July 29, 1981 (Supp. 81-4). Section R4-11-802 repealed, new Section filed April 4, 1986, adopted effective January 1, 1988 (Supp. 86-2). Amended effective May 17, 1995 (Supp. 95-2). Former Section R4-11-802 renumbered to R4-11-1301, new Section R4-11-802 renumbered from R4-11-1202 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-803. Renumbered**Historical Note**

Adopted effective March 28, 1978 (Supp. 78-2). Former Section R4-11-122 renumbered as Section R4-11-803 without change effective July 29, 1981 (Supp. 81-4). Section R4-11-803 repealed, new Section filed April 4, 1986, adopted effective January 1, 1988 (Supp. 86-2). Amended effective May 17, 1995 (Supp. 95-2). Former Section R4-11-803 renumbered to R4-11-1302 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-804. Renumbered**Historical Note**

Adopted effective March 28, 1978 (Supp. 78-2). Former Section R4-11-123 renumbered as Section R4-11-804 without change effective July 29, 1981 (Supp. 81-4). Section R4-11-804 repealed, new Section filed April 4, 1986, adopted effective January 1, 1988 (Supp. 86-2). Former Section R4-11-804 renumbered to R4-11-1303 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-805. Renumbered**Historical Note**

Adopted as filed April 4, 1986, adopted effective January 1, 1988 (Supp. 86-2). Amended effective May 17, 1995 (Supp. 95-2). Former Section R4-11-805 renumbered to R4-11-1304 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-806. Renumbered**Historical Note**

Adopted effective May 17, 1995 (Supp. 95-2). Former Section R4-11-806 renumbered to R4-11-1305 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 9. RESTRICTED PERMITS**R4-11-901. Application for Restricted Permit**

- A. An applicant for a restricted permit shall provide the following information and documentation on a form provided by the Board:
 1. A sworn statement of the applicant's qualifications;
 2. A photograph of the applicant that is no more than six months old;
 3. A letter of endorsement from any other jurisdiction in which an applicant is licensed, sent directly from that jurisdiction to the Board;
 4. A letter of endorsement from the applicant's commanding officer or superior if the applicant is in the military or employed by the United States government;
 5. A copy of the applicant's cardiopulmonary resuscitation certification, indicating the expiration date; and
 6. A copy of the applicant's pending contract with a charitable dental clinic or organization offering dental services.
- B. The Board may request that an applicant provide a copy of a certified document that indicates the reason for a name change if the applicant's application contains different names.

Historical Note

Adopted effective September 7, 1979 (Supp. 79-5). Former Section R4-11-130 renumbered as Section R4-11-901, repealed, and new Section R4-11-901 adopted effective July 29, 1981 (Supp. 81-4). Amended effective April 4, 1986 (Supp. 86-2). Emergency amendment adopted effective June 18, 1991, pursuant to A.R.S. § 41-1026, valid for only 90 days (Supp. 91-2). Emergency expired. Adopted effective July 13, 1992 (Supp. 92-3). Former Section R4-11-901 renumbered to R4-11-401, new Section R4-11-901 renumbered from R4-11-1001 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-902. Issuance of a Restricted Permit

Before issuing a restricted permit under A.R.S. §§ 32-1237 through 32-1239, the Board shall investigate the professional and statutory qualifications of the charitable dental clinic or organization. For the Board to recognize a dental clinic or organization under A.R.S. § 32-1237 as a charitable dental clinic or organization permitted to employ dentists not licensed in Arizona who hold restricted permits, the Board shall make the following findings of fact:

1. That the entity is a dental clinic or organization offering professional dental services in a manner consistent with the public health;
2. That the dental clinic or organization offering dental services is operated for charitable purposes only, offering dental services either without compensation to the clinic or organization or with compensation at a minimum rate

to provide only reimbursement for dental supplies and overhead costs;

3. That the persons performing dental services for the dental clinic or organization do so without compensation; and
4. That the charitable dental clinic or organization operates in accordance with applicable provisions of law.

Historical Note

Adopted effective September 7, 1979 (Supp. 79-5). Former Section R4-11-131 renumbered as Section R4-11-902, repealed, and new Section R4-11-902 adopted effective July 29, 1981 (Supp. 81-4). Amended effective April 4, 1986 (Supp. 86-2). Emergency amendment adopted effective June 18, 1991, pursuant to A.R.S. § 41-1026, valid for only 90 days (Supp. 91-2). Emergency expired. Adopted effective July 13, 1992 (Supp. 92-3). Former Section R4-11-902 renumbered to R4-11-402, new Section R4-11-902 renumbered from R4-11-1002 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-903. Recognition of a Charitable Dental Clinic Organization

In order for the Board to make the findings required in R4-11-902, the charitable clinic or organization shall provide information to the Board, such as employment contracts with restricted permit holders, Articles and Bylaws, and financial records.

Historical Note

Adopted effective September 7, 1979 (Supp. 79-5). Former Section R4-11-132 renumbered as Section R4-11-903, repealed, and new Section R4-11-903 adopted effective July 29, 1981 (Supp. 81-4). Former Section R4-11-903 renumbered to R4-11-403, new Section R4-11-903 renumbered from R4-11-1003 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-904. Determination of Minimum Rate

In determining whether professional services are provided at a minimum rate to provide reimbursement for dental supplies and overhead costs, pursuant to A.R.S. § 32-1237(1), the Board shall obtain and review information relating to the actual cost of dental supplies to the dental clinic or organization, the actual overhead costs of the dental clinic or organization, the amount of charges for the dental services offered and any other information relevant to its inquiry.

Historical Note

Adopted effective September 7, 1979 (Supp. 79-5). Former Section R4-11-133 renumbered as Section R4-11-904 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-904 renumbered to R4-11-404, new Section R4-11-904 renumbered from R4-11-1004 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-905. Restricted Permit Denial

If the applicant for restricted permit or the dental clinic or organization with whom the applicant has a pending contract refuses or fails to furnish information requested by the Board with the result that the Board is unable to perform its duties under A.R.S. §§ 32-1237 through 32-1239, the Board shall not issue a restricted permit to the applicant.

Historical Note

Adopted effective September 7, 1979 (Supp. 79-5). Former Section R4-11-134 renumbered as Section R4-11-905 without change effective July 29, 1981 (Supp. 81-4). Amended effective April 4, 1986 (Supp. 86-2). Former Section R4-11-905 renumbered to R4-11-405, new Sec-

tion R4-11-905 renumbered from R4-11-1005 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-906. Fully Retired or Permanently Disabled Licensees or Certificate Holders Providing Charitable Services

A licensee or certificate holder who is fully retired or permanently disabled may contribute services to a recognized charitable institution and still retain that classification for triennial registration purposes.

Historical Note

Adopted effective July 29, 1981 (Supp. 81-4). Amended effective April 4, 1986 (Supp. 86-4). Emergency amendment adopted effective June 18, 1991, pursuant to A.R.S. § 41-1026, valid for only 90 days (Supp. 91-2). Emergency expired. Adopted effective July 13, 1992 (Supp. 92-3). Former Section R4-11-906 renumbered to R4-11-406, new Section R4-11-906 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-907. Repealed

Historical Note

Adopted effective April 4, 1986 (Supp. 86-2). Former Section R4-11-907 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-908. Repealed

Historical Note

Adopted effective April 4, 1986 (Supp. 86-2). Former Section R4-11-908 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-909. Renumbered

Historical Note

Adopted effective May 17, 1995 (Supp. 95-2). Former Section R4-11-909 renumbered to R4-11-407 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 10. DENTAL TECHNICIANS

R4-11-1001. Duties of Dental Laboratory Technician

A dental technician may, pursuant to a written work order of a dentist, construct, alter, repair, reline, reproduce, or duplicate any prosthetic denture, bridge, appliance, or other structure to be worn in the human mouth.

Historical Note

Adopted effective November 28, 1980 (Supp. 80-6). Former Section R4-11-140 renumbered as Section R4-11-1001 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-1001 renumbered to R4-11-901, new Section R4-11-1001 renumbered from R4-11-602 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1002. Dental Technician Laboratory Work Orders

- A. A dentist shall retain a copy of a dental technician laboratory work order for at least two years from date of issuance.
- B. A dental laboratory technician shall retain an original laboratory work order for at least one year from date of issuance.
- C. A dentist and a dental laboratory technician shall permit the Board to inspect upon demand, the original and the duplicate of all work orders.

Historical Note

Adopted effective November 28, 1980 (Supp. 80-6). Former Section R4-11-141 renumbered as Section R4-11-1002 without change effective July 29, 1981 (Supp. 81-4).

- 4). Former Section R4-11-1002 renumbered to R4-11-902, new Section R4-11-1002 renumbered from R4-11-603 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1003. Renumbered**Historical Note**

Adopted effective November 28, 1980 (Supp. 80-6).
Former Section R4-11-142 renumbered as Section R4-11-1003 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-1003 renumbered to R4-11-903 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1004. Renumbered**Historical Note**

Adopted effective November 28, 1980 (Supp. 80-6).
Former Section R4-11-143 renumbered as Section R4-11-1004 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-1004 renumbered to R4-11-904 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1005. Renumbered**Historical Note**

Adopted effective November 28, 1980 (Supp. 80-6).
Former Section R4-11-144 renumbered as Section R4-11-1005 without change effective July 29, 1981 (Supp. 81-4). Former Section R4-11-1005 renumbered to R4-11-905 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1006. Repealed**Historical Note**

Adopted effective September 12, 1985 (Supp. 85-5).
Repealed effective July 21, 1995 (Supp. 95-3).

ARTICLE 11. ADVERTISING**R4-11-1101. Advertising**

- A.** A dentist may advertise as a specialist or use the terms "specialty" or "specialist" to describe professional services only if the dentist practices in one of the specialty areas listed below, is recognized by the specialty board which certifies specialists for that area, and is accredited by the Commission on Dental Accreditation of the American Dental Association:
1. Endodontics,
 2. Oral and maxillofacial surgery,
 3. Orthodontics and dentofacial orthopedics,
 4. Pediatric dentistry,
 5. Periodontics,
 6. Prosthodontics,
 7. Dental Public Health, or
 8. Oral Pathology.
- B.** For purposes of this Article, a dentist who wishes to advertise as a specialist in a recognized field shall meet the criteria in one or more of the following categories:
1. Grandfathered: A dentist who declared a specialty area before December 31, 1964, according to requirements established by the American Dental Association, and has a practice limited to a dentistry area approved by the American Dental Association.
 2. Educationally qualified: A dentist who has successfully completed an educational program, two or more years long, in a specialty area accredited by the Commission on Dental Accreditation of the American Dental Association,

as specified by the Council on Dental Education of the American Dental Association.

3. Board eligible: A dentist who has met the guidelines of an established specialty board in a recognized specialty area that operates in accordance with the requirements established by the American Dental Association. The specialty board shall have established examination requirements and standards, appraised an applicant's qualifications, administered comprehensive examinations, and upon completion issued a certificate to a dentist who has achieved diplomate status.
 4. Board certified: A dentist who has met the requirements of a specialty board referenced in subsection (B)(3), and who has received a certificate from the specialty board, indicating the dentist has achieved diplomate status.
- C.** A dentist, dental hygienist, or denturist whose advertising implies that services rendered in a dental office are of a specialty area other than those listed in subsection (A), and recognized by a specialty board which has been accredited by the Commission on Dental Accreditation of the American Dental Association, has violated this Article and A.R.S. § 32-1201(18)(u), and is subject to discipline pursuant to A.R.S. Title 32, Chapter 11.
- D.** A dentist may advertise specific dental services or certification in a non-specialty area only if the advertisement includes the phrase "Services provided by an Arizona licensed general dentist." A dental hygienist may advertise specific dental hygiene services only if the advertisement includes the phrase "Services provided by an Arizona licensed dental hygienist." A denturist may advertise specific denture services only if the advertisement includes the phrase "Services provided by an Arizona certified denturist."

Historical Note

Adopted effective July 29, 1981 (Supp. 81-4). Amended by repealing the former guideline on "Management of Craniomandibular Disorders" and adopting a new guideline effective June 16, 1982 (Supp. 82-3). Repealed effective November 20, 1992 (Supp. 92-4). Former Section R4-11-1101 repealed, new Section R4-11-1101 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1102. Renumbered**Historical Note**

Adopted effective July 29, 1981 (Supp. 81-4). Former Section R4-11-1102 renumbered to R4-11-501 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1103. Reserved**R4-11-1104. Repealed****Historical Note**

Adopted effective November 25, 1985 (Supp. 85-6).
Former Section R4-11-1104 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1105. Repealed**Historical Note**

Adopted effective September 12, 1985 (Supp. 85-5).
Repealed effective July 21, 1995 (Supp. 95-3).

ARTICLE 12. CONTINUING DENTAL EDUCATION**R4-11-1201. Continuing Dental Education**

- A.** A licensee, certificate holder, or restricted permit holder shall satisfy a continuing dental education requirement which is

designed to provide an understanding of current developments, skills, procedures, or treatment related to the licensee, certificate holder, or restricted permit holder's practice.

- B.** A licensee, certificate holder, or restricted permit holder shall complete the recognized continuing dental education required by Article 12 each triennial period.
- C.** A licensee or certificate holder receiving an initial license or certificate shall complete the prescribed credit hours of recognized continuing dental education by the end of the first full triennial period.

Historical Note

Adopted effective May 21, 1982 (Supp. 82-3). Former Section R4-11-1201 renumbered to R4-11-801, new Section R4-11-1201 renumbered from R4-11-1402 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1202. Compliance

- A.** When applying for a renewal license or certificate pursuant to A.R.S. § 32-1236 for a dentist, A.R.S. § 32-1287 for a dental hygienist, and A.R.S. § 32-1297.06 for a denturist, the dentist, dental hygienist, or denturist shall certify to the Board completion of the prescribed credit hours of recognized continuing dental education triennially.
- B.** Each licensee or certificate holder shall possess, before receiving an original or renewal license or certificate, a current cardiopulmonary resuscitation (CPR) certificate from the American Red Cross, the American Heart Association, or another certifying agency that follows the same procedures, standards, and techniques for CPR training and certification as the American Red Cross or American Heart Association.
- C.** A licensee or certificate holder shall include a written affidavit affirming the licensee's or certificate holder's completion of the prescribed credit hours of recognized continuing dental education with a renewal application. A licensee or certificate holder shall include on the affidavit the licensee's or certificate holder's name, license or certificate number, name of sponsor, program title and description, date, time, and location of the program, and dates of attendance.
- D.** If a licensee or certificate holder fails to meet the credit hour requirement because of illness, military service, dental or religious missionary activity, residence in a foreign country, or other extenuating circumstances, the Board, upon written request, may grant an extension of time to complete the recognized continuing dental education credit hour requirement. The licensee or certificate holder shall request an extension before the time for renewal.
- E.** The Board shall only accept recognized continuing dental education credits accrued during the triennial period immediately before renewal for license or certificate renewal.
- F.** A licensee or certificate holder shall not carry forward recognized continuing dental education credit to a succeeding triennial renewal period.
- G.** A licensee or certificate holder shall preserve documentation of attendance for each program for which credit is claimed. The documentation shall verify the recognized continuing dental education credit hours for the preceding two triennial renewal periods.
- H.** Each year, the Board shall audit continuing education affidavits on a random basis or when the documentation submitted by the licensee or certificate holder does not appear to comply with this Section. A licensee or certificate holder whose affidavit is selected for audit shall provide the Board with documentation of attendance in support of the affidavit within 60 days from the date the licensee or certificate holder received notice, by certified mail, of the audit.

- I.** Any false statement in an affidavit shall be grounds for suspension, revocation, refusal to renew a license or certificate, or any other disciplinary action authorized by A.R.S. Title 32, Chapter 11.

Historical Note

Adopted effective May 21, 1982 (Supp. 82-3). Former Section R4-11-1202 renumbered to R4-11-802, new Section R4-11-1202 renumbered from R4-11-1403 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1203. Dentists

A dentist shall complete 72 hours of recognized continuing dental education in a triennial period as follows:

1. At least 45 credit hours of recognized continuing dental education shall be in one or more of the following areas: Dental and medical health, cardiopulmonary resuscitation, preventative services, dental diagnosis and treatment planning, dental clinical procedures, including courses in corrective and restorative oral health and basic dental sciences which may include current research, new concepts in dentistry, and behavioral and biological sciences which are oriented to dentistry. A licensee who holds a permit to administer anesthesia, semi-conscious sedation, or conscious sedation who is required to obtain continuing education pursuant to Article 13 may apply those credit hours to this requirement.
2. No more than 18 credit hours of recognized continuing dental education shall be in the following areas: Dental practice organization and management, patient management skills, and methods of health care delivery.
3. At least three credit hours of recognized continuing dental education shall be in the area of chemical dependency.
4. At least six credit hours of recognized continuing dental education shall be in the area of infectious diseases and infectious disease control.
5. The Board may apply credit hours earned by a licensee in continuing education ordered by the Board pursuant to A.R.S. Title 32, Chapter 11 toward a licensee's 72-hour requirement.

Historical Note

Adopted effective September 12, 1985 (Supp. 85-5). Repealed effective July 21, 1995 (Supp. 95-3). New Section R4-11-1203 renumbered from R4-11-1404 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1204. Dental Hygienists

A dental hygienist shall complete 54 credit hours of recognized continuing dental education in a triennial period as follows:

1. At least 34 credit hours of recognized continuing dental education shall be in one or more of the following areas: Dental and medical health, cardiopulmonary resuscitation, and dental hygiene services, which may include periodontal disease, care of implants, maintenance of cosmetic restorations and sealants, radiology safety and techniques, and new concepts in dental hygiene.
2. No more than 14 credit hours of recognized continuing dental education shall be in one or more of the following areas: Dental hygiene practice organization and management, patient management skills, and methods of health care delivery.
3. At least two credit hours of recognized continuing dental education shall be in the area of chemical dependency.

4. At least four credit hours of recognized continuing dental education shall be in the area of infectious diseases and infectious disease control.
5. The Board may apply credit hours earned by a licensee in continuing education ordered by the Board pursuant to A.R.S. Title 32, Chapter 11 toward a licensee's 54-hour requirement.

Historical Note

New Section R4-11-1204 renumbered from R4-11-1405 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1205. Denturists

Denturists shall complete 24 credit hours of recognized continuing dental education in a triennial period as follows:

1. At least 15 credit hours of recognized continuing dental education shall be in one or more of the following areas: Medical and dental health, cardiopulmonary resuscitation, laboratory procedures, and clinical procedures.
2. No more than six credit hours of recognized continuing dental education may be in one or more of the following areas: Denturist practice organization and management, patient management skills, and methods of health care delivery.
3. At least one credit hour of recognized continuing dental education shall be in the area of chemical dependency.
4. At least two credit hours of recognized continuing dental education shall be in the area of infectious diseases and infectious disease control.
5. The Board may apply credit hours earned by a certificate holder in continuing education ordered by the Board pursuant to A.R.S. Title 32, Chapter 11 toward a certificate holder's 24-hour requirement.

Historical Note

New Section R4-11-1205 renumbered from R4-11-1406 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1206. Restricted Permit Holders

A restricted permit holder shall comply with the requirements in R4-11-1202 except as indicated below:

1. When applying for renewal pursuant to A.R.S. § 32-1238, the licensee shall provide information to the Board that the licensee has completed 24 credit hours of recognized continuing dental education yearly.
2. Each renewal application shall include a written affidavit affirming the licensee's completion of 24 credit hours of recognized continuing dental education. The affidavit shall include a licensee's name, license number, name of sponsor, program title and description, date, time, and location of the program, and dates of attendance.
3. To determine whether to grant the renewal, the Board shall only consider recognized continuing dental education credits accrued between July 1 and June 30 immediately before the licensee submitted the renewal application.
4. A restricted permit holder shall maintain documentation of attendance for each program for which credit is claimed. The documentation shall verify the recognized continuing dental education credits in which the licensee has participated during the preceding two renewal periods.
5. A restricted permit holder shall complete 24 hours of recognized continuing dental education prior to renewal as follows:

- a. At least 15 credit hours of recognized continuing dental education shall be in one or more of the subjects enumerated in R4-11-1203(1).
- b. No more than six credit hours of recognized continuing dental education may be in one or more of the subjects enumerated in R4-11-1203(2).
- c. At least one credit hour of recognized continuing dental education shall be in the subjects enumerated in R4-11-1203(3).
- d. At least two credit hours of recognized continuing dental education shall be in the subjects enumerated in R4-11-1203(4).
- e. The Board may apply credit hours earned by a licensee in continuing education ordered by the Board pursuant to A.R.S. Title 32, Chapter 11 toward a licensee's 24-hour requirement.

Historical Note

New Section R4-11-1206 renumbered from R4-11-1407 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1207. Types of Courses

A licensee or certificate holder shall obtain recognized continuing dental education from one or more of the following types of curricula:

1. Seminars, symposiums, lectures, or programs designed to provide an understanding of current developments, skills, procedures, or treatment related to the practice of dentistry, or
2. Curricula designed to prepare for specialty board certification as a specialist or recertification examinations or advanced training at an accredited institution as defined in A.R.S. Title 32, Chapter 11.
3. No more than 18 credit hours for dentists, 14 credit hours for dental hygienists, or six credit hours for denturists per triennial period shall be earned for any of the following activities which provide an understanding of current developments, skills, procedures, or treatment related to the practice of dentistry:
 - a. A dental education program based on self-instruction which utilizes videotapes, audiotapes, films, filmstrips, slides, radio broadcasts, computers, or independent reading with examination;
 - b. Participation on the Board or in Board complaint investigations including clinical evaluations and investigative interviews, peer review, or quality of care or utilization review in a hospital, institution, or governmental agency;
 - c. Providing dental-related instruction to dental, dental hygiene, or denturist students, or allied health professionals in a recognized dental school, recognized dental hygiene school, or recognized school of denture technology, or is sponsored by a national or state dental, dental hygiene, or denturist association; or
 - d. Publication or presentation of a dental paper, report, or book that the licensee or certificate holder has authored and published, which provides information on current developments, skills, procedures, or treatment related to the practice of dentistry. Credit hours shall be claimed only once for materials presented. Credits shall be claimed as of the date of publication or original presentation. One credit hour may be reported per hour of preparation, writing or presentation.

Historical Note

New Section R4-11-1207 renumbered from R4-11-1408 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 13. GENERAL ANESTHESIA AND SEDATION**R4-11-1301. General Anesthesia and Semi-conscious Sedation**

- A.** Before inducing general anesthesia by any means, or semi-conscious sedation by intravenous or intramuscular means, on an outpatient basis, a dentist shall possess a Section 1301 permit issued by the Board. A dentist may renew a Section 1301 permit every three years by complying with R4-11-1306.
- B.** To obtain or renew a Section 1301 permit, a dentist shall:
 1. Submit a completed application on a form supplied by the Board office that, in addition to the requirements of subsections (B)(2) and (B)(3), and R4-11-1306, includes:
 - a. General information about the applicant such as:
 - i. Name;
 - ii. Home and office addresses and telephone numbers;
 - iii. Limitations of practice;
 - iv. Hospital affiliations;
 - v. Denial, curtailment, revocation, or suspension of hospital privileges;
 - vi. Denial of membership in, denial of renewal of membership in, or disciplinary action by a dental organization; and
 - vii. Denial of licensure by, denial of renewal of licensure by, or disciplinary action by a dental regulatory body; and
 - b. The dentist's dated and signed affidavit stating that the information provided is true, and that the dentist has read and complied with the Board's statutes and rules;
 2. On forms provided by the Board, provide a dated and signed affidavit attesting that a facility where the dentist will administer general anesthesia or semi-conscious sedation:
 - a. Contains the following properly operating equipment and supplies:
 - i. Anesthesia or analgesia machine,
 - ii. Emergency drugs,
 - iii. Electrocardiograph monitor,
 - iv. Pulse oximeter,
 - v. Cardiac defibrillator,
 - vi. Positive pressure oxygen,
 - vii. Suction equipment,
 - viii. Laryngoscope and blades,
 - ix. Endotracheal tubes,
 - x. Magill forceps,
 - xi. Oral airways,
 - xii. Stethoscope, and
 - xiii. Blood pressure monitoring device; and
 - b. Maintains a staff of supervised personnel capable of handling procedures, complications, and emergency incidents. All personnel involved in administering and monitoring general anesthesia or semi-conscious sedation shall hold a current certificate in basic cardiopulmonary resuscitation (CPR);
 3. Hold a valid license to practice dentistry in this state;
 4. Maintain a current permit to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration;
 5. Hold a current certificate from the American Heart Association or the American Red Cross in advanced cardiac life support (ACLS); and
 6. Meet one or more of the following conditions:
 - a. Complete a full credit load, as defined by the training program, during one calendar year of training, in anesthesiology or related academic subjects, beyond the undergraduate dental school level in a training program described in R4-11-1305(A), offered by a hospital accredited by the Joint Commission of Accreditation of Hospitals Organization, or sponsored by a university accredited by the American Dental Association Commission on Dental Accreditation;
 - b. Be a Diplomate of the American Board of Oral and Maxillofacial Surgeons or eligible for examination by the American Board of Oral and Maxillofacial surgeons, a Fellow of the American Association of Oral and Maxillofacial surgeons, or a Fellow of the American Dental Society of Anesthesiology or eligible for examination by the American Dental Society of Anesthesiology; or
 - c. Employ or work with a licensed allopathic or osteopathic physician who is a member of the anesthesiology staff of an accredited hospital in this state and ensure that the anesthesiologist remains on the dental facility premises until any patient given general anesthetic or semi-conscious sedation regains consciousness and is discharged.
- C.** After submitting the application and written evidence of compliance with requirements in subsection (B) to the Board, the dentist shall schedule an onsite evaluation by the Board during which the dentist shall administer general anesthesia and semi-conscious sedation. After a dentist completes the application requirements and successfully completes the onsite evaluation, the Board shall issue the dentist a Section 1301 permit.
 1. The onsite evaluation team shall consist of two dentists who are Board members, or Board designees. The onsite evaluation team shall look for the following:
 - a. The availability of equipment and personnel as specified in subsection (B)(2);
 - b. Proper administration of general anesthesia or parenteral semi-conscious sedation to a patient by the dentist in the presence of the evaluation team;
 - c. Successful responses by the dentist to oral examination questions from the evaluation team about patient management, medical emergencies, and emergency medications;
 - d. Proper documentation of controlled substances, that includes a perpetual inventory log showing the receiving, administering, dispensing, and destroying of controlled substances; and
 - e. Proper recordkeeping as specified in subsection (D) by reviewing the records generated for the patient specified in subsection (C)(1)(b).
 2. The evaluation of a subsequent facility in which general anesthesia or semi-conscious sedation is administered by a dentist who possesses a Section 1301 permit may be waived by the Board staff upon receipt in the Board office of an affidavit verifying compliance with subsection (C)(1)(a).
- D.** A dentist shall keep an anesthesia record for each general anesthesia and semi-conscious sedation administered that:
 1. Includes the following entries:
 - a. Pre-operative and post-operative electrocardiograph reports;
 - b. Pre-operative, post-operative, and intra-operative pulse oximeter readings;

- c. Pre-operative and post-operative blood pressure and vital signs;
 - d. Intra-operative blood pressures; and
 - e. A list of all medications given, with dosage and time intervals; and
2. May include the following entries:
- a. Route and site of administration;
 - b. Type of catheter or portal with gauge;
 - c. Indicate nothing by mouth or time of last intake of food or water;
 - d. Consent form; and
 - e. Time of discharge and status, including name of escort.
- E.** A dentist who obtains a Section 1301 permit may employ a nurse anesthetist to administer general anesthesia or semi-conscious sedation under the dentist's direct supervision.
- F.** A dentist who obtains a Section 1301 permit may also induce conscious sedation without obtaining a Section 1302 permit.

Historical Note

New Section R4-11-1301 renumbered from R4-11-802 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Amended by final rulemaking at 9 A.A.R. 1054, effective May 6, 2003 (Supp. 03-1).

R4-11-1302. Conscious Sedation

- A.** A dentist who possesses a Section 1301 permit may also induce conscious sedation. Before inducing conscious sedation by intravenous or intramuscular means on an outpatient basis, a dentist who does not possess a Section 1301 permit shall possess a Section 1302 permit issued by the Board. A dentist may renew a Section 1302 permit every three years by complying with R4-11-1306.
- B.** To obtain or renew a Section 1302 permit, the dentist shall:
1. Submit a completed application on a form supplied by the Board office that, in addition to the requirements of subsections (B)(2) and (B)(3) and R4-11-1306, includes:
 - a. General information about the applicant such as:
 - i. Name;
 - ii. Home and office addresses and telephone numbers;
 - iii. Limitations of practice;
 - iv. Hospital affiliations;
 - v. Denial, curtailment, revocation, or suspension of hospital privileges;
 - vi. Denial of membership in, denial of renewal of membership in, or disciplinary action by a dental organization; and
 - vii. Denial of licensure by, denial of renewal of licensure by, or disciplinary action by a dental regulatory body; and
 - b. The dentist's dated and signed affidavit stating that the information provided is true, and that the dentist has read and complied with the Board's statutes and rules;
 2. On forms provided by the Board, provide a dated and signed affidavit attesting that a facility where the dentist will administer conscious sedation by intravenous or intramuscular route:
 - a. Contains the following properly operating equipment and supplies:
 - i. Emergency drugs,
 - ii. Positive pressure oxygen,
 - iii. Stethoscope,
 - iv. Suction equipment,
 - v. Nasopharyngeal tubes,
 - vi. Pulse oximeter,
 - vii. Oropharyngeal tubes, and
 - viii. Blood pressure monitoring device; and
 - b. Maintains a staff of supervised personnel capable of handling procedures, complications, and emergency incidents, including at least one staff member who:
 - i. Holds a current certificate in basic cardiopulmonary resuscitation (CPR);
 - ii. Is present during the conscious sedation procedure; and
 - iii. After the procedure, monitors the patient until discharge;
3. Hold a valid license to practice dentistry in this state;
4. Maintain a current permit to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration;
5. Hold a current certificate from the American Heart Association or the American Red Cross in advanced cardiac life support (ACLS); and
6. Participate in 60 clock hours of Board-approved undergraduate, graduate, or postgraduate education within the three years before submitting the permit application, that covers training in basic conscious sedation, including:
- a. Administration of parenteral sedative medications to at least 10 patients;
 - b. Physical evaluation;
 - c. Management of medical emergencies;
 - d. The importance of and techniques for maintaining proper documentation; and
 - e. Monitoring and the use of monitoring equipment.
- C.** After submitting the application and written evidence of compliance with requirements outlined in subsection (B) to the Board, the dentist shall schedule an onsite evaluation by the Board during which the dentist shall administer conscious sedation. After a dentist completes the application requirements and successfully completes the onsite evaluation, the Board shall issue the dentist a Section 1302 permit.
1. The onsite evaluation team shall consist of two dentists who are Board members, or Board designees. The onsite evaluation team shall look for the following:
 - a. The availability of equipment and personnel as specified in subsection (B)(2);
 - b. Proper administration of conscious sedation to a patient by the dentist in the presence of the evaluation team;
 - c. Successful responses by the dentist to oral examination questions from the evaluation team about patient management, medical emergencies, and emergency medications;
 - d. Proper documentation of controlled substances, that includes a perpetual inventory log showing the receiving, administering, dispensing, and destroying of all controlled substances; and
 - e. Proper recordkeeping as specified in subsection (D) by reviewing the records generated for the patient receiving conscious sedation as specified in subsection (C)(1)(b).
 2. The onsite evaluation of a subsequent facility in which conscious sedation is administered by a dentist who possesses a Section 1302 permit may be waived by the Board staff upon receipt in the Board office of an affidavit verifying compliance with subsection (C)(1)(a).
- D.** A dentist shall keep an anesthesia record for each conscious sedation administered that:
1. Includes the following entries:

- a. Pre-operative, post-operative, and intra-operative pulse oximeter readings;
 - b. Pre-operative and post-operative blood pressure and vital signs;
 - c. Intra-operative blood pressures; and
 - d. A list of all medications given, with dosage and time intervals; and
 - 2. May include the following entries:
 - a. Pre-operative and post-operative electrocardiograph report;
 - b. Route and site of administration;
 - c. Type of catheter or portal with gauge;
 - d. Indicate nothing by mouth or time of last intake of food or water;
 - e. Consent form; and
 - f. Time of discharge and status, including name of escort.
- E.** A dentist who obtains a Section 1302 permit may employ a nurse anesthetist to administer conscious sedation under the dentist's direct supervision.
- Historical Note**
- New Section R4-11-1302 renumbered from R4-11-803 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Amended by final rulemaking at 9 A.A.R. 1054, effective May 6, 2003 (Supp. 03-1).
- R4-11-1303. Oral Conscious Sedation**
- A.** Before inducing oral conscious sedation on an outpatient basis, a dentist shall possess a Section 1303 permit issued by the Board, unless the dentist qualifies for a permit under subsection (E). A dentist may renew a Section 1303 permit every three years by complying with R4-11-1306.
- 1. A dentist who possesses a Section 1301 or Section 1302 permit may also induce oral conscious sedation without obtaining a Section 1303 permit.
 - 2. The administration of an anti-anxiety drug is not combination inhalation and enteral conscious sedation if:
 - a. Only one dose of one anti-anxiety drug is administered;
 - b. The intent of administering the anti-anxiety drug is anxiolysis only; and
 - c. The administered dose of anti-anxiety drug is within the current guidelines for anxiolysis dosage on the manufacturer's package insert or other recognized drug reference.
- B.** To obtain or renew a Section 1303 permit, a dentist shall:
- 1. Submit a completed application on a form supplied by the Board office that, in addition to the requirements of subsections (B)(2) and (B)(3) and R4-11-1306, includes:
 - a. General information about the applicant such as:
 - i. Name;
 - ii. Home and office addresses and telephone numbers;
 - iii. Limitations of practice;
 - iv. Hospital affiliations;
 - v. Denial, curtailment, revocation, or suspension of hospital privileges;
 - vi. Denial of membership in, denial of renewal of membership in, or disciplinary action by a dental organization; and
 - vii. Denial of licensure by, denial of renewal of licensure by, or disciplinary action by a dental regulatory body; and
 - b. The dentist's dated and signed affidavit stating that the information provided is true, and that the dentist has read and complied with the Board's statutes and rules;
- 2.** On forms provided by the Board, provide a dated and signed affidavit attesting that a facility where the dentist will administer oral conscious sedation:
- a. Contains the following properly operating equipment and supplies:
 - i. Emergency drugs,
 - ii. Positive pressure oxygen,
 - iii. Precordial stethoscope,
 - iv. Suction equipment,
 - v. Pulse oximeter,
 - vi. Blood pressure monitoring device, and
 - vii. Auxiliary lighting; and
 - b. Maintains a staff of supervised personnel capable of handling procedures, complications, and emergency incidents, including at least one staff member who:
 - i. Holds a current certificate in basic cardiopulmonary resuscitation (CPR);
 - ii. Is present during the oral conscious sedation procedure; and
 - iii. After the procedure, monitors the patient until discharge;
- 3.** Hold a valid license to practice dentistry in this state;
- 4.** Maintain a current permit to prescribe and administer controlled substances in this state issued by the United States Drug Enforcement Administration;
- 5.** Hold a current certificate in basic cardiopulmonary resuscitation (CPR); and
- 6.** Meet one or both of the following:
- a. Complete a Board-approved post-doctoral residency program that includes documented training in oral conscious sedation; or
 - b. Participate in 30 clock hours of Board-approved undergraduate, graduate, or post-graduate education in oral conscious sedation within the five years before submitting the permit application, that include:
 - i. Training in basic oral conscious sedation,
 - ii. Administration or observation of the oral conscious sedation of at least five patients,
 - iii. Pharmacology,
 - iv. Physical evaluation,
 - v. Management of medical emergencies,
 - vi. The importance of and techniques for maintaining proper documentation, and
 - vii. Monitoring and the use of monitoring equipment.
- C.** After submitting the application and written evidence of compliance with requirements in subsection (B) to the Board, the dentist shall schedule an onsite evaluation by the Board. After a dentist completes the application requirements and successfully completes the onsite evaluation, the Board shall issue the dentist a Section 1303 permit.
- 1. The onsite evaluation team shall consist of two dentists who are Board members, or Board designees. The onsite evaluation team shall look for the following:
 - a. The availability of equipment and personnel as specified in subsection (B)(2);
 - b. Proper documentation of controlled substances, that includes a perpetual inventory log showing the receiving, administering, dispensing, and destroying of controlled substances; and
 - c. Proper recordkeeping as specified in subsection (D) by reviewing the forms that document the anesthesia record.

2. The evaluation of a subsequent facility in which oral conscious sedation is administered by a dentist who possesses a Section 1303 permit may be waived by the Board staff upon receipt in the Board office of an affidavit verifying compliance with subsection (C)(1)(a).
- D.** A dentist who induces oral conscious sedation shall keep an anesthesia record for each oral conscious sedation procedure that:
 1. Includes the following entries:
 - a. Pre-operative, post-operative, and intra-operative pulse oximeter oxygen saturation and pulse rate readings;
 - b. Pre-operative and post-respiratory rate;
 - c. Pre-operative and post-operative blood pressure;
 - d. Documented reasons for not taking vital signs if a patient's behavior or emotional state prevents monitoring personnel from taking vital signs;
 - e. List of all medications given, including dosage and time intervals;
 - f. Patient's weight;
 - g. Consent form;
 - h. Special notes, such as, nothing by mouth or last intake of food or water; and
 - i. Time of discharge and status, including name of escort; and
 2. May include the following entries:
 - a. Pre-operative and post-operative electrocardiograph report; and
 - b. Intra-operative blood pressures.
- E.** To continue inducing oral conscious sedation after May 1, 2004, a dentist licensed in this state who has been inducing oral conscious sedation for at least three years before May 1, 2003 may obtain a Section 1303 permit without meeting the educational requirements of subsection (B)(6) by:
 1. Applying for a Section 1303 permit on or before May 1, 2004;
 2. Complying with subsections (B)(1) through (B)(5); and
 3. Providing the Board with the following:
 - a. Documentation of 12 oral conscious sedation cases per year for the previous three years;
 - b. Documentation of 12 continuing education hours in oral conscious sedation in the previous three years; and
 - c. Records from the last 10 consecutive oral conscious sedation cases with an affidavit attesting that the records are the licensee's last 10 consecutive cases.

Historical Note

New Section R4-11-1303 renumbered from R4-11-805 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Former Section R4-11-1303 renumbered to R4-11-1304; new Section R4-11-1303 made by final rulemaking at 9 A.A.R. 1054, effective May 6, 2003 (Supp. 03-1).

R4-11-1304. Reports of Adverse Occurrences

If a death, or incident causing a patient temporary or permanent physical or mental injury or requiring medical intervention, occurs in an outpatient facility as a direct result of the administration of general anesthesia, semi-conscious sedation, conscious sedation, or oral conscious sedation, the permit holder and the treating dentist involved shall submit a complete report of the incident to the Board within 10 days after the occurrence.

Historical Note

New Section R4-11-1304 renumbered from R4-11-805 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1). Former Section R4-

11-1304 renumbered to R4-11-1305; new Section R4-11-1304 renumbered from R4-11-1303 and amended by final rulemaking at 9 A.A.R. 1054, effective May 6, 2003 (Supp. 03-1).

R4-11-1305. Education

- A.** To obtain a Section 1301 permit by satisfying the education requirement of R4-11-1301(B)(6), a dentist shall successfully complete an advanced graduate or post-graduate education program in pain control.
 1. The program shall include instruction in the following subject areas:
 - a. Anatomy and physiology of the human body and its response to the various pharmacologic agents used in pain control;
 - b. Physiological and psychological risks for the use of various modalities of pain control;
 - c. Psychological and physiological need for various forms of pain control and the potential response to pain control procedures;
 - d. Techniques of local anesthesia, sedation, and general anesthesia, and psychological management and behavior modification, as they relate to pain control in dentistry; and
 - e. Handling emergencies and complications related to pain control procedures, including the maintenance of respiration and circulation, immediate establishment of an airway, and cardiopulmonary resuscitation.
 2. The program shall consist of didactic and clinical training. The didactic component of the program shall:
 - a. Be the same for all dentists, whether general practitioners or specialists; and
 - b. Include each subject area listed in subsection (A)(1).
 3. The program shall provide at least one calendar year of training as prescribed in R4-11-1301(B)(6)(a).
- B.** To maintain a Section 1301 or 1302 permit under R4-11-1301 or R4-11-1302, a dentist shall:
 1. Participate in 12 clock hours of continuing education every three years in one or more of the following areas:
 - a. General anesthesia;
 - b. Conscious sedation;
 - c. Physical evaluation;
 - d. Medical emergencies;
 - e. Monitoring and use of monitoring equipment; or
 - f. Pharmacology of drugs and non-drug substances used in general anesthesia or conscious sedation; and
 2. Hold a current certificate from the American Heart Association or American Red Cross in advanced cardiac life support (ACLS).
- C.** To maintain a Section 1303 permit issued under R4-11-1303, a dentist shall:
 1. Participate in six clock hours of continuing education every three years in one or more of the following areas:
 - a. Oral conscious sedation,
 - b. Physical evaluation,
 - c. Medical emergencies,
 - d. Monitoring and use of monitoring equipment, or
 - e. Pharmacology of oral conscious sedation drugs and non-drug substances, and
 2. Hold a current certificate in basic cardiopulmonary resuscitation (CPR).

Historical Note

New Section R4-11-1305 renumbered from R4-11-806 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

tive February 4, 1999 (Supp. 99-1). Former Section R4-11-1305 renumbered to R4-11-1306; new Section R4-11-1305 renumbered from R4-11-1304 and amended by final rulemaking at 9 A.A.R. 1054, effective May 6, 2003 (Supp. 03-1).

R4-11-1306. Renewal of Permit

- A.** To renew a Section 1301, 1302, or 1303 permit, a dentist shall:
 1. Provide written documentation of compliance with the applicable continuing education requirements in R4-11-1305;
 2. Before December 31 of the year the permit expires, submit a completed application on a form supplied by the Board office as described in R4-11-1301, R4-11-1302, or R4-11-1303; and
 3. Not less than 90 days before the expiration of a dentist's current permit, arrange for a new onsite evaluation as described in R4-11-1301, R4-11-1302, or R4-11-1303.
- B.** After a dentist successfully completes the evaluation and submits the required affidavits, the Board shall issue a renewal Section 1301, 1302, or 1303 permit.
- C.** The Board may stagger due dates for renewal applications.

Historical Note

Section R4-11-1306 renumbered from R4-11-1305 and amended by final rulemaking at 9 A.A.R. 1054, effective May 6, 2003 (Supp. 03-1).

ARTICLE 14. DISPENSING DRUGS AND DEVICES FOR PROFIT AND NOT FOR PROFIT

R4-11-1401. Registration and Renewal

- A.** A dentist who is currently licensed to practice dentistry in Arizona may dispense controlled substances, prescription-only drugs, and prescription-only devices for profit after providing the Board the following information:
 1. A completed registration form which includes the following information:
 - a. The dentist's name and dental license number;
 - b. A list of the types of drugs and devices to be dispensed for profit, including controlled substances; and
 - c. Locations where the dentist desires to dispense the drugs and devices for profit; and
 2. A copy of the dentist's current Drug Enforcement Administration Certificate of Registration for each dispensing location from which the dentist desires to dispense the drugs and devices for profit.
- B.** The Board shall issue a numbered certificate indicating the dentist is registered with the Board to dispense drugs and devices for profit.
- C.** A dentist shall renew a registration to dispense drugs and devices for profit by complying with the requirements in subsection (A) before the dentist's June 30 triennial license expiration date. When a dentist has made timely and complete application for the renewal of a registration, the dentist may continue to dispense until the Board approves or denies the application. Failure to renew a registration shall result in immediate loss of dispensing for profit privileges.

Historical Note

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1401 repealed, new Section R4-11-1401 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1402. Prescribing

- A.** A prescription order shall contain, in addition to the requirements of A.R.S. § 32-1298(C), the following information:

1. Date of issuance;
 2. Name and address of the patient to whom the prescription has been issued;
 3. Name, strength, and quantity of the drug prescribed;
 4. Name and address of the dentist prescribing the medication; and
 5. Drug Enforcement Administration registration number of the dentist prescribing for controlled substances.
- B.** Before dispensing for profit, a dentist shall write a prescription for the drug or device being dispensed, and include on the prescription the following statement in bold type: "This prescription may be filled by the prescribing dentist or by a pharmacy of your choice." If a dentist is not dispensing for profit, a prescription does not need to be written.

Historical Note

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1402 renumbered to R4-11-1201, new Section R4-11-1402 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1403. Labeling and Dispensing

- A.** A dentist shall include the following information on the label of all drugs and devices dispensed:
 1. The dentist's name, address, and telephone number;
 2. The serial number;
 3. The date the drug or device is dispensed;
 4. The patient's name;
 5. Name, strength, and quantity of drug dispensed;
 6. The name of the drug manufacturer or distributor;
 7. Directions for use and cautionary statement necessary for the safe and effective use of the drug or device; and
 8. If a controlled substance is prescribed, the cautionary statement "Caution: Federal law prohibits the transfer of this drug to any person other than the patient for whom it was prescribed."
- B.** A dentist shall perform the following professional practices, in directly dispensing for profit a prescription medication or device from a prescription order:
 1. Verify the legalities and pharmaceutical feasibility of dispensing, including allergies, incompatibilities, unusual quantities of dangerous drugs or narcotics, and signature of the prescribing dentist;
 2. Verify that the dosage is within proper limits;
 3. Interpret the prescription order;
 4. Prepare the package and label, or assume responsibility for preparing, packaging, and labeling the medication or device, dispensed under an individual prescription order;
 5. Check the label to verify it precisely communicates the prescriber's directions and hand-initial every label;
 6. Record, or assume responsibility for recording the serial number and the date dispensed on the front of the original prescription order; and
 7. Record on the original prescription order the name or initials of the dentist who dispensed the order.
- C.** Before delivery, the dentist shall prepare the drug or device to ensure compliance with the prescription and personally inform the patient of the name of the drug or device, directions for its use, precautions, and storage requirements.
- D.** A dentist shall purchase all dispensed drugs and devices from a licensed manufacturer, distributor, or pharmacy.

Historical Note

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1403 renumbered to R4-11-1202, new Section R4-11-1403 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1404. Storage and Packaging

- A.** A dentist shall keep all drugs and devices secured in a locked cabinet or room, control access to the cabinet or room by written procedure, and maintain an ongoing inventory of the contents. The written procedure shall be made available to the Board or its authorized agents on demand for inspection or copying.
- B.** A dentist shall maintain storage rooms so that the temperature in the storage rooms does not exceed 85° F.
- C.** A dentist shall not dispense a drug or device that has expired or is improperly labeled.
- D.** A dentist shall not redispense a drug or device that has been returned.
- E.** A dentist shall dispense a drug or device:
 - 1. In a prepackaged container or light-resistant container with a consumer safety cap, unless the patient or patient's representative requests a non-safety cap; and
 - 2. With a label that is mechanically or electronically printed.
- F.** A dentist shall destroy controlled substances pursuant to the Drug Enforcement Administration regulations or by using a reverse distributor. A list of reverse distributors may be obtained from the Drug Enforcement Administration.
- G.** A dentist shall destroy an outdated, deteriorated, or defective non-controlled substance drug or device by returning it to the supplier or using a reverse distributor. A list of reverse distributors may be obtained from the Drug Enforcement Administration.

Historical Note

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1404 renumbered to R4-11-1203, new Section R4-11-1404 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1405. Recordkeeping

- A.** A dentist shall:
 - 1. Chronologically date and sequentially number prescription orders in the order that the drugs or devices were originally dispensed,
 - 2. Sequentially file orders separately from patient records, as follows:
 - a. Schedule II drug orders shall be filed separately from all other prescription orders;
 - b. Schedule III, IV, and V drug orders shall be filed separately from all other prescription orders; and
 - c. All other prescription orders shall be filed separately from those stated in subsections (A)(2)(a) and (b),
 - 3. Record the name of the manufacturer or distributor of the drug or device dispensed on each prescription order and label, and
 - 4. Record the name or initials of the dentist dispensing the drug or device on each prescription order and label.
- B.** A dentist shall record in the patient's dental record the name, form, and strength of the drug or device dispensed, the quantity or volume dispensed, the date the drug or device is dispensed, and the dental therapeutic reasons for dispensing the drug or device, with respect to dispensing for profit and not for profit.
- C.** A dentist shall maintain purchase and dispensing records of all drugs and devices, for profit and not for profit, for three years from the date dispensed.
- D.** A dentist who dispenses drugs and devices, for profit and not for profit, shall inventory schedule II, III, IV, and V drugs as prescribed by federal law. A dentist shall perform a controlled substance inventory on March 1 annually, as directed by the

Board, and at the opening or closing of a dental practice. A dentist shall maintain the inventory for three years from the inventory date. One inventory book may be used for all controlled substances. When recording Schedule II drugs, an exact count shall be done. When doing an inventory on bottles of 1,000 or less of Schedule III, IV, and V drugs, an estimate may be made.

- E.** A dentist shall maintain invoices, for drugs and devices dispensed for profit and not for profit, for three years from the date of the invoices, filed as follows:
 - 1. Schedule II drug invoices shall be filed separately from all other records;
 - 2. Schedule III, IV, and V drugs shall be filed separately from all other records; and
 - 3. All other invoices shall be filed separately from those referenced in subsections (E)(1) and (2).
- F.** A dentist shall file Drug Enforcement Administration order forms, No. DEA 222, for controlled substances sequentially and separately from every other record.

Historical Note

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1405 renumbered to R4-11-1204, new Section R4-11-1405 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1406. Compliance

- A.** A dentist who determines that drugs have been illegally removed from the dentist's office, or that there is a drug shortage of controlled substances, shall immediately notify a local law enforcement agency and the Board. The dentist also shall provide the law enforcement agency with a written report, using a DEA 106 form, and provide copies to the Drug Enforcement Administration and the Board within seven days of the discovery.
- B.** A dentist who dispenses drugs or devices in a manner inconsistent with Article 14 is subject to discipline pursuant to A.R.S. Title 32, Chapter 11, Article 3.

Historical Note

Adopted effective July 21, 1995; inadvertently not published with Supp. 95-3 (Supp. 95-4). Former Section R4-11-1406 renumbered to R4-11-1205, new Section R4-11-1406 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1407. Renumbered**Historical Note**

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1407 renumbered to R4-11-1206 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1408. Renumbered**Historical Note**

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1408 renumbered to R4-11-1207 by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1409. Repealed**Historical Note**

Adopted effective July 21, 1995 (Supp. 95-3). Former Section R4-11-1409 repealed by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

**ARTICLE 15. COMPLAINTS, INVESTIGATIONS,
DISCIPLINARY ACTION, REINSTATEMENT OF
REVOKED LICENSES**

R4-11-1501. Ex-parte Communication

A complainant and licensee or certificate holder against whom a complaint has been filed, shall not engage in ex-parte communication.

Historical Note

New Section R4-11-1501 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1502. Complaint Investigator Qualifications

A dentist, dental hygienist, or denturist appointed as a Board investigator shall:

1. Possess a valid license, restricted permit, or certificate to practice in Arizona;
2. Have at least five years of practice in Arizona; and
3. Not have been disciplined by the Board within the past 24 months.

Historical Note

New Section R4-11-1502 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1503. Initial Complaint Review

A. The president's designee shall initially review a complaint. If the designee determines that the Board has no jurisdiction, the complaint shall be forwarded to the Board for termination.

B. If the designee determines that the Board has jurisdiction:

1. Board personnel shall notify the complainant and licensee or certificate holder of the investigative and adjudicative process as follows:
 - a. By regular U.S. Mail that the complaint has been filed and whether a clinical evaluation will be scheduled; and
 - b. By certified U.S. Mail of an informal interview, investigative interview, or mediation, if the complaint has been tabled or remanded, of a postponement or continuance, and a subpoena, notice, or order.
2. The president's designee shall refer the complaint to an informal interview, investigative interview, or mediation. Where the allegations, if proven, may result in suspension or revocation of license or certificate, the complaint shall be referred to an informal interview. All other complaints shall be referred to investigative interview or mediation.
3. The Board may subpoena a patient's treatment records from the licensee, certificate holder, or any other health care provider.
4. Board personnel shall provide the licensee or certificate holder with a copy of the complaint upon receipt of the treatment records.
5. If a complaint alleges a violation of the state or federal criminal code, the Board shall refer the complaint to the proper law enforcement agency.
6. If during the course of investigating a complaint, but before an investigative or informal interview, it appears the evidence does not support the allegations contained in the complaint the president's designee shall forward the complaint to the Board for termination.

C. The Board's procedures for complaints referred to clinical evaluation are:

1. Except as provided in subsection (C)(1)(a), the president's designee shall appoint one or more dentists to perform a clinical evaluation. If there is more than one clinical evaluation, the clinical evaluators do not need to

be present at the same time. The Board shall approve each clinical evaluator.

a. If the complaint involves a dental hygienist, denturist, or dentist who is a recognized specialist, the president's designee shall appoint a clinical evaluator from that area of practice or specialty.

b. The Board shall not disclose the identity of the licensee to a clinical evaluator before the Board receives the clinical evaluator's report.

2. The president's designee or clinical evaluator shall prepare a clinical evaluation report for the informal or investigative interview or Board meeting. The president's designee shall provide a copy of the clinical evaluation report to the licensee or certificate holder. The licensee or certificate holder may submit a written response to the clinical evaluation report before the informal or investigative interview or Board meeting.

D. The Board's procedures for investigative and informal interviews are as follows:

1. Board personnel shall provide the complainant and licensee or certificate holder with written notice of the time and date of the investigative interview or informal interview. The notice shall include all allegations contained in the complaint and any allegation which arose during the Board's investigation before the notice date.
2. The Board's president or the president's designee may request an informal interview. The Board president or president's designee:
 - a. May appoint one or more Board members to act as the informal interviewing officer; or
 - b. May appoint a Board approved investigator to assist the informal interviewing officer; and
 - c. Shall appoint one investigator or Board member from the relevant area of practice or specialty, if the licensee or certificate holder is a dental hygienist, denturist, or recognized dental specialist.
3. If a complaint is referred for an investigative interview, the president's designee shall appoint an investigator or an investigative panel, consisting of at least two dentists and one lay person to conduct the investigative interview. One panel member, who is not a lay person, shall serve as the chairperson. If the licensee or certificate holder is a dental hygienist, denturist, or a recognized dental specialist, at least one investigator shall be from that area of practice or specialty.
4. The complainant and licensee may agree to waive the requirements in this Section regarding appointment of a licensee from a specific practice area or specialty, or a lay person.
5. The complainant and licensee or certificate holder and any witness present at the informal interview or investigative interview may be questioned by the informal interviewing officer, investigators, or investigative interview panel. Counsel representing the complainant, licensee, or certificate holder, or the complainant, licensee, or certificate holder may direct questions through the chairperson of the investigative interview panel or informal interviewing officer. Following the presentation of all testimony and evidence, the complainant and licensee or certificate holder or their respective representative may make a closing statement.
6. The informal interviewing officer, investigator, or investigative interview panel shall develop findings of fact, conclusions of law, and a recommendation for disposition of the complaint based on the treatment records, the clinical evaluation observations and documentation, testimony of

the complainant and licensee or certificate holder, and any other witnesses or relevant documents.

7. Board personnel shall prepare a written report of the investigative or informal interview from the recording of the interview and the informal interviewing officer's or investigator's or investigative interview panel's written findings of fact, conclusions of law, and recommendation.
8. Board personnel shall record all informal and investigative interviews mechanically or stenographically.

Historical Note

New Section R4-11-1503 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

R4-11-1504. Expired

Historical Note

New Section R4-11-1504 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).
Section expired under A.R.S. § 41-1056(E) at 9 A.A.R. 3669, effective April 30, 2003 (Supp. 03-3).

ARTICLE 16. MEDIATION

R4-11-1601. Mediation Process

- A. The Board's executive director or chief investigator shall review each complaint that does not involve dental incompetence, malpractice, or criminal allegations to decide whether to refer the complaint to mediation.
- B. A complaint against a respondent who has two or more final Board disciplinary actions in the 24 months immediately preceding the date that the current complaint was filed with the Board shall not be referred to mediation.
- C. If a complaint is referred to mediation, the investigator shall seek written agreements from the complainant and respondent to participate in mediation before mediation proceeds.
- D. The Board's staff may subpoena relevant records. The Board's staff shall provide the mediator with all documentation regarding the complaint including the complaint, response, dental records, billings, and correspondence. The documents obtained by subpoena or produced by either the complainant or the respondent may be used in the investigation of the complaint if an investigation proceeds.
- E. Upon receipt of the signed agreements to participate in mediation, and all relevant records, the mediator shall schedule the location, date, and time of the mediation. Mediation may be held in person, or telephonically.
- F. The Board staff shall mail a mediation meeting notice to the complainant and respondent at least 20 days before the scheduled mediation.
- G. Mediation sessions shall not be recorded. Statements made during mediation are confidential and shall not be used in any subsequent administrative or legal proceeding. The mediator's notes shall not be part of the complaint file, and shall be kept confidential. The mediator shall not be subpoenaed, or otherwise involved, in any court proceeding, lawsuit, or other legal action involving the parties and the subject matter that was a part of a complaint that was sent to mediation.
- H. Any agreement reached by the complainant and respondent shall not be construed as an admission of any wrongdoing.
- I. If a mediation agreement is reached, the mediator shall put it in writing. The agreement shall be signed by the complainant and the respondent, and is subject to review and approval by the Board.
- J. The Board staff shall monitor the respondent's compliance with the terms of the mediation agreement.
- K. If the respondent fully complies with the terms of a Board approved mediation agreement, the complaint shall be dismissed by Board order.
- L. A complaint shall proceed through the Board's investigative and adjudicative procedures pursuant to A.R.S. Title 32, Chapter 11, Article 3 if:
 1. A complaint is not referred to mediation,
 2. Mediation is declined,
 3. A mediation agreement is not reached,
 4. The Board does not approve a mediation agreement, or
 5. The Board is presented with facts indicating that the respondent may not have complied with the terms of mediation agreement.

Historical Note

New Section R4-11-1601 adopted by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).

ARTICLE 17. REHEARING OR REVIEW

R4-11-1701. Procedure

- A. Except as provided in subsection (F), a party who is aggrieved by an order issued by the Board may file a written motion for rehearing or review with the Board, pursuant to A.R.S. Title 41, Chapter 6, Article 10, specifying the grounds for rehearing or review.
- B. A party filing a motion for rehearing or review under this rule may amend the motion at any time before it is ruled upon by the Board. Other parties or the attorney general may file a response within 15 days after the date the motion for rehearing or review is filed. The Board may require that the parties file supplemental memoranda explaining the issues raised in the motion, and may permit oral argument.
- C. The Board may grant a rehearing or review of the order for any of the following causes materially affecting a party's rights:
 1. Irregularity in the proceedings of the Board or any order or abuse of discretion, which deprived a party of a fair hearing;
 2. Misconduct of the Board, its personnel, the informal interviewing officer, the investigative interview panel, the hearing officer, the administrative law judge, or the prevailing party;
 3. Accident or surprise which could not have been prevented by ordinary prudence;
 4. Excessive or insufficient penalties;
 5. Error in the admission or rejection of evidence or other errors of law occurring at the hearing or during the progress of the proceeding;
 6. That the findings of fact or decision is arbitrary, capricious, or an abuse of discretion;
 7. That the findings of fact or decision is not justified by the evidence or is contrary to law; or
 8. Newly discovered, material evidence which could not, with reasonable diligence, have been discovered and produced at the original hearing.
- D. The Board may affirm or modify the order or grant a rehearing or review to all or any of the parties on all or part of the issues for any of the reasons in subsection (C). After giving the parties notice and an opportunity to be heard on the matter, the Board may grant a motion for rehearing or review, timely served, for a reason not stated in the motion. The Board, within the time for filing a motion for rehearing or review, may grant a rehearing or review on its own initiative for any reason for which it might have granted relief on motion of a party. An order granting a rehearing or review shall specify the grounds on which rehearing or review is granted, and any rehearing or review shall cover only those matters specified.

- E.** When a motion for rehearing or review is based upon affidavits, they shall be served with the motion. An opposing party or the attorney general may, within 15 days after such service, serve opposing affidavits.
- F.** If the Board makes specific findings that the immediate effectiveness of the order is necessary for the preservation of public health and safety and that a rehearing or review is impracticable, unnecessary, or contrary to the public interest, the order may be issued as a final order without an opportunity for a rehearing or review. If an order is issued as a final order without an opportunity for rehearing or review, the aggrieved party shall make an application for judicial review of the order within the time limits permitted for application for judicial review of the Board's final order.
- G.** The Board shall rule on the motion for rehearing or review within 15 days after the response has been filed, or at the Board's next meeting after the motion is received, whichever is later. If a rehearing or review is granted, the Board shall hold the rehearing or review within 120 days after it issues the order granting the rehearing or review. If a motion for rehearing or review is not considered or reheard within these time limits, the motion is granted.

Historical Note

New Section R4-11-1701 renumbered from R4-11-701 and amended by final rulemaking at 5 A.A.R. 580, effective February 4, 1999 (Supp. 99-1).